

Psi Omega Fraternity



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This report, signed by the Deputy Councilor, President, and Recorder, must be forwarded by **April 15th** and **October 15th** of each year to the Central Office.

Chapter _____ Date _____

Membership Record -	Seniors	Juniors	Sophomores	Freshmen	Total	Pledges
Active Members						
Initiated since last report						

Has your Executive Board functioned in accordance with the Constitution and By-laws of the fraternity?

Meetings: Number held _____ Dates _____ Average attending _____

State the nature of programs other than regular order of business. If paper was read, give subject and author.

Has the Chapter Newsletter to the Frater been mailed? _____

Deputy Councilor Visits _____

Alumni Contacts _____

Social Functions _____

Comments and Suggestions _____

Signed:

Deputy Councilor

President

Recorder