

TSSDAC OFFICER ENDORSEMENT & ELIGIBILITY FORM

DEADLINE: August 15th, 2016

Chapter: _____ Regent: _____

Candidate Name: _____

Natl Number: _____ Date Approved: _____ Tenure: _____

Email: _____ Phone: _____

Address: _____

ELIGIBILITY:

THIS SECTION IS REQUIRED

Chapter Regent-Date(s) served: _____

STATE OFFICE

DATES SERVED IN THIS POSITION

STATE REGENT: _____

STATE FIRST VICE REGENT _____

STATE SECOND VICE REGENT _____

STATE CHAPLAIN _____

STATE RECORDING SECRETARY _____

STATE CORRESPONDING SECRETARY _____

STATE REGISTRAR _____

STATE TREASURER _____

STATE HISTORIAN _____

STATE LIBRARIAN _____

ADDITIONAL RESUME INFORMATION: