

THETA CHI FRATERNITY

Citation of Honor

Nomination Form

*A certificate authorized by the Grand Chapter for presentation to members for outstanding service to the Fraternity. Presentation is also granted to non-members for outstanding service to the fraternity movement.
Approval is required by the Chief Executive Officer for the Citation of Honor.*

Name of individual submitting nomination: _____

Chapter and School: _____

Phone Number: _____ Email Address: _____

Full Name of Nominee: _____

If member, name of chapter and graduation year: _____

If not a member, please include other organization name or job title: _____

Award is being presented by (name of chapter or group): _____

Please indicate one of the following: the name of chapter; the name of association, corporation, or alumni group; Grand Chapter; Norwich Housing Corporation; The Foundation Chapter.

Date of Presentation: _____

Please describe why nominee is deserving of recognition (attach a separate sheet, if necessary):

Ship certificate to: Name: _____

Address: _____

City, State, & Zip Code: _____

Phone Number: _____ Email Address: _____

*Citation of Honor **\$10.00 each** including shipping & handling **MUST BE PREPAID**
Both form and payment must be received by the IHQ before approval process can begin.
Please allow at least 2 weeks for approval, production, and mailing of certificate. Certificate is not framed.*

For Credit Card Payments (You can email this form, then call the IHQ to give your payment information.)

Name on card: _____ Credit card number: _____

Expiration Date: _____ Security code: _____

SUBMIT FORM AND PAYMENT TO:

Theta Chi Fraternity, PO Box 503, Carmel IN 46082

via email: awards@thetachi.org

via fax: 317-824-1908

Headquarters Use Only

CHIEF EXECUTIVE OFFICER APPROVAL: _____ Approved _____ NOT Approved

Signature: _____ Date: _____

DATES:

Form & Fees Rcd: ____/____/____ Cert. Prepared & Shipped: ____/____/____ Member Record Updated: ____/____/____