

California State University, Northridge  
STATEMENT OF NEW MEMBER RECRUITMENT AND/OR INTAKE PLAN

The officers and members of \_\_\_\_\_ are proud to announce the recruitment and intake plan for of potential new recruits and/or prospective new members. This plan is in compliance with the *CSUN Recruitment, Intake and New Member Procedures* and applies to (circle one): fall or spring semester of 20\_\_\_\_.

**Section 1: Program Dates**

Prospective member recruitment will begin on \_\_\_\_\_  
Bids/invitations to membership will be extended on \_\_\_\_\_  
Bids/invitations to membership will be formally  
accepted on/by (new member pinning/ceremony) \_\_\_\_\_  
New Member Education will begin on \_\_\_\_\_  
New Member Education will end on \_\_\_\_\_  
New Members will be initiated on \_\_\_\_\_

**Section 2: Program Calendar**

Attached is a complete calendar that indicates both the dates listed above as well as the following related program activities: recruitment events, informational sessions, interest meetings, extension of bids (beyond designated bid day), retreats, teambuilding events, mandatory study hours, meetings, initiation week events, and any other relevant dates that include new/prospective members.

**Section 3: Recruitment and New Member Educators**

The CSUN student in charge of Recruitment for the chapter will be:

\_\_\_\_\_  
Name  
\_\_\_\_\_  
Title in Chapter  
\_\_\_\_\_  
Phone                      E-mail

The CSUN student in charge of New Member Education for the chapter will be:

\_\_\_\_\_  
Name  
\_\_\_\_\_  
Title in Chapter  
\_\_\_\_\_  
Phone                      E-mail

**Submitted by (all signatures are required):**

***We certify that the enclosed plan abides by the policies, procedures and expectations set forth by CSU Northridge. We understand it is our responsibility to work closely with all chapter members to uphold the outlined activities and timelines identified within the enclosed plan. Changes to this plan will be submitted at least two academic days in advance.***

\_\_\_\_\_  
Chapter President (Signature)                      Printed Name                      Date                      Phone

\_\_\_\_\_  
Chapter Recruitment Lead (signature)                      Printed Name                      Date                      Phone

***As University Advisor, I certify that I have reviewed this plan and find it in compliance with University policies and procedures:***

\_\_\_\_\_  
University Advisor (signature)                      Printed Name                      Date