

KD ALUMNAE MAY USE THIS FORM TO INTRODUCE A KD LEGACY TO A KD CHAPTER.

The sorority asks members to please use the online optional recommendation and optional legacy introduction form. Please visit www.kappadelta.org/alumnae-life/recommendation-forms/ to learn more.

KAPPA DELTA LEGACY PRACTICE:

- The responsibility of choosing members belongs to the collegiate chapter.
- A KD legacy is the daughter, granddaughter or sister of an initiated member in good standing. A member in good standing is a member who has not resigned or is not on national probation. Half and step relations are considered legacies.
- A legacy should be a qualified Potential New Member (PNM) in regard to scholarship, activities, accomplishments and honors. Being a KD legacy does not guarantee an invitation or membership. Some chapters may have more legacies than new member openings.
- A legacy may be released at any time during the recruitment process.
- If a legacy accepts an invitation to a KD Preference event, she will be placed at the top of the chapter's bid list.
- The alumna submitting this form will receive an electronic acknowledgment when submitted online or from the chapter via email or USPS if no email is given. Since membership selection is confidential, no other communication will be forthcoming.
- A legacy may also have an optional KD recommendation written by someone who knows her personally. A recommendation form may be completed electronically by visiting www.kappadelta.org/alumnae-life/recommendation-forms. Please note that electronic forms are preferred.
- Forms should be submitted online or mailed directly to the chapter. Forms are needed no later than the first day of the month in which the chapter's recruitment begins in order to be considered by the chapter. For more information, visit www.kappadelta.org/find-a-chapter.

LEGACY INFORMATION:

Name of legacy _____
FIRST (NICKNAME OR NAME CALLED) LAST

INSTITUTION _____ BEGINNING SCHOOL TERM (EXAMPLE: FALL 2016)

College class: First Year Sophomore Junior Senior

KD RELATIVE (FILLING OUT THIS FORM) INFORMATION:

Check one: Sister Mother Grandmother

FIRST NAME _____ MAIDEN/MIDDLE NAME _____ LAST NAME _____

EMAIL ADDRESS _____

COLLEGE/UNIVERSITY _____ CHAPTER _____ INITIATION YEAR _____

SIGNATURE _____ DATE _____

Other KD Relatives:

Check one: Sister Mother Grandmother Name _____

Check one: Sister Mother Grandmother Name _____