NOTIFICATION OF TRANSFER

Please use this Form to notify the Chapter of your transfer from your Chapter to another school. If we have a Chapter at that school, we will notify the Chapter.

Your Full Name			
Home Mailing Address: (future if moving)			
	City	State	Zip
Chapter/University Transferring To:			
Last Quarter At Tech: (circle one) FALL	WINTER	SPRING	SUMMER
Arriving at University:	ing)	 Y ear	

Mail to: The Gamma Beta Phi Society

P.O. Box 3109 Ruston, LA 71272

OR

Give to Chapter Secretary