

Alpha Kappa Alpha Sorority, Incorporated®
Theta Xi Omega Chapter
Cotillion Club Application

Applicant Information

Applicant's Name _____ **Date of Birth** _____

Street Address (Physical) _____

Mailing Address (If different from Physical)

City/State _____ **Zip code** _____

Home Phone Number _____ **Cell Phone Number** _____

Email Address _____

Applicant Parent Information

Father's Name _____

Father's Address (if different) _____

Phone Number _____

Email Address _____

Mother's Name _____

Mother's Address (if different) _____

Phone Number _____

Email Address _____

Applicant Education Information

High School _____ **2023 - 2024 Grade** _____

Extracurricular Activities _____

Honors, Awards, Achievements _____

Community Service Activity

Church Affiliation _____

Church / Community Involvement _____

Other Information

Talents _____

Person you admire the most _____

Why do you admire this person? _____

Main goal in life _____
