

**OMEGA PSI PHI FRATERNITY, INC.  
BETA ALPHA ALPHA CHAPTER  
MEMBER PROFILE**

**Date:** \_\_\_\_\_

**Name:** \_\_\_\_\_ **DOB:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Phone (Home):** \_\_\_\_\_ **(Cell):** \_\_\_\_\_ **email:** \_\_\_\_\_

**Profession/Company:** \_\_\_\_\_

**Spouse/Significant Other:** \_\_\_\_\_

**Children:** \_\_\_\_\_

**Hobbies/Interests:** \_\_\_\_\_

**Chapter of Initiation/Date:** \_\_\_\_\_

**College(s)/Year of Graduation/Degree(s):** \_\_\_\_\_

**Chapter/District/Int'l Offices Held (Yr.):** \_\_\_\_\_

**Chapter/District/Int'l Committees & Roles (Past & Present):** \_\_\_\_\_

**Chapter/District/Int'l Awards Received (Yr.):** \_\_\_\_\_

**If additional space is needed, please use back of this form or attach another sheet.**