

H-114

Revised - 18

**Due at AΔK Headquarters annually by June 30**

# ALPHA DELTA KAPPA

**ANNUAL CHAPTER HIGHLIGHTS SUMMARY**

***The purpose of this form is to provide chapter accountability and to comply with the Bylaws and IRS requirements.***

|  |  |
| --- | --- |
| S/P/N\* | Chapter |

# \*S/P/N = State/Province/Nation

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Meeting Date held June 1-May 31 (only 9 are required): |  |  |  |  |  |  |  |  |  |
| **NUMBER** of Members at Meeting  (Excluding Honorary, Limited & Active-On-Leave): |  |  |  |  |  |  |  |  |  |
| Chapter Minutes sent to S/P/N recipient(s)? Yes or No |  |  |  |  |  |  |  |  |  |

**List the number of members attending the following meetings during this reporting period (some areas may not hold all meetings listed below):**

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Council Meetings** |  | **District Meetings** |  | **S/P/N Conventions** |  | **Other S/P/N Meetings** |  | **Regional Conference** |  | **Int’l Convention** |  |

|  |  |  |
| --- | --- | --- |
| 1. | List Altruistic Projects: |  |
| 2. | List Scholarships and Amounts Awarded: |  |
| 3. | List Ways & Means Activities: |  |
| 4. | List **Community and School Recognition** Received by  Members and/or Chapter: |  |

|  |  |  |
| --- | --- | --- |
| Name and Office of Submitter | Phone or Email | Date Submitted |

Mail: 1615 W 92nd St, Kansas City, MO 64114/Fax:816.363.4010

Email: [kbanks@alphadeltakappa.org](mailto:kbanks@alphadeltakappa.org)

This form is also available to submit online.

**Keep a copy for your chapter files. Headquarters will send a copy on to your S/P/N president.**