

*Delta Theta Chi Sorority
Crystal Flame Award*



Nomination Form

Chapter being Nominated: _____

Title of the **ONE** project which goes beyond ordinary Community Service:

Date(s) of Project: _____

Number in Chapter who Participated: _____

Community Served: _____

Estimated Number of People Impacted: _____

Please describe, on a separate sheet of paper, how the ONE special service provided to the community "*held high the torch of learning for others to see by and in turn shown the light on Delta Theta Chi*". Please limit to no more than 1200 words.

Name of Individual / Chapter / Province Submitting Nomination: _____

Date of Nomination: _____

***** For NEC Use Only *****

Date Received: _____

Number in Chapter: _____

Percent Participation: _____