

**ALPHA KAPPA ALPHA SORORITY, INC.  
NORTH ATLANTIC REGION  
SEMESTER AND CUMULATIVE AVERAGES**

CHAPTER \_\_\_\_\_

	FALL	YEAR	
	SPRING	YEAR	

SCHOOL \_\_\_\_\_

LOCATION \_\_\_\_\_

The following is the report of averages of the members of the above mentioned chapter and is submitted to the Regional D Director in accordance with the requirements of the Constitution and Bylaws of Alpha Kappa Alpha Sorority, Inc. Those to be suspended for low grades are indicated by ( \* ).

MEMBER	SOPH.	JR.	SR.	SEM. AVER.	CUM. AVER.	SEM. HRS.	COMMENTS
1.							
2.							
3.							
4.							
5.							
6.							
7.							
8.							
9.							
10.							
11.							
12.							

I certify that the above information is correct.

Signature: \_\_\_\_\_ Basileus \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_ Chapter Average

Signature: \_\_\_\_\_ Graduate \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_ Registrar / Official

**Send to:** Soror Evelyn Sample-Oates North Atlantic Regional Director      501 Monticello Lane, Plymouth Meeting, PA 19462