



BOOK DRIVE COMPLETION FORM

CHAPTER NUMBER _____ COLLEGE/UNIVERSITY NAME _____

CONTACT INFORMATION FOR STUDENT VICE PRESIDENTS INVOLVED IN BOOK DRIVE:

NAME _____

EMAIL _____

PHONE _____

NAME _____

EMAIL _____

PHONE _____

BOOKS/MONEY COLLECTED _____

DONEE ORGANIZATION _____

Who will be receiving the book donations?

WHY DID YOUR CHAPTER SELECT THIS ORGANIZATION?

WHAT TYPES OF LITERACY PROGRAMS DOES THE ORGANIZATION OFFER, AND WHAT AGE GROUPS ARE SERVED BY THOSE PROGRAMS?

Chapter President, please verify that the number of books collected above is correct.

SIGNATURE OF VERIFICATION _____ DATE _____

Please submit form and photo(s) of the books your chapter collected via email to kwhite@phikappaphi.org or by mail to:

The Honor Society of Phi Kappa Phi
Attn: Kay White
7576 Goodwood Blvd.
Baton Rouge, LA 70806