

**OMEGA PHI ALPHA  
NATIONAL SERVICE SORORITY  
PETITION FOR NATIONAL OFFICE**

Name \_\_\_\_\_

Office petitioning for \_\_\_\_\_

Home address \_\_\_\_\_

City, State and zip code \_\_\_\_\_

Home phone number \_\_\_\_\_

School address and phone number (if applicable)

\_\_\_\_\_

\_\_\_\_\_

Are you presently employed? \_\_\_\_\_

Employer \_\_\_\_\_

Type of work \_\_\_\_\_ Hours per week \_\_\_\_\_

College \_\_\_\_\_ Chapter \_\_\_\_\_

Date of Graduation \_\_\_\_\_ Degree \_\_\_\_\_

Major \_\_\_\_\_ Minor \_\_\_\_\_

Will you be able to attend both mid-year and national conventions? (Circle) Yes No

**OMEGA PHI ALPHA DATA**

Years of active chapter service \_\_\_\_\_

Chapter offices held \_\_\_\_\_

National offices held \_\_\_\_\_

Other services to nationals \_\_\_\_\_

**BACKGROUND INFORMATION**

**Note: Answering yes to any of the following questions WILL NOT disqualify you from the position.**

1. Have you ever been convicted of a felony? (circle one) Yes No

If yes, please explain \_\_\_\_\_

\_\_\_\_\_

2. Have you ever been asked to resign or been discharged through due process from any position? (circle one) Yes No

If yes, please explain. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**REFERENCES**

Personal: Name: \_\_\_\_\_ Relation: \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

email \_\_\_\_\_

Professional: Name: \_\_\_\_\_ Relation: \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

email \_\_\_\_\_

OPA: Name: \_\_\_\_\_ Relation: \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

email \_\_\_\_\_

I validate that the information I have provided is truthful to the best of my knowledge. I also understand that upon my election I may be subjected to a background check

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

*Please attach a personal photo and your resume to this application.  
If you **will not** be attending convention, attach a summary explaining why you feel that you are qualified for the office for which you are applying.*

I, \_\_\_\_\_, hereby allow Omega Phi Alpha to post my picture and information included in the OPA Data section of this petition on [www.omegaphialpha.org](http://www.omegaphialpha.org)

Signed: \_\_\_\_\_ Date: \_\_\_\_\_