## **DELTA SIGMA DELTA**

## **Membership Dismissal**

Date	e received in Supreme Scribe's Office	
Purpose: This form or an exact copy must be should no longer appear on the Fraternity roll	•	ch individual whose nam
Please type or pri	nt clearly.	
Date		
To the Supreme Scribe:		
This is to officially inform you that on (Date)		
He/she was expelled, suspended, dropped fro	om Chapter. (Name)	
	Deputy	Supreme Grand Master

rev.sept 2015 hpcha