



CHAPTER INVESTIGATION REPORT

Chapter Name: _____ Chapter No. _____

Petitioner Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone Number (____) ____-____ Date of Birth _____ Age: _____

Where were you born (City and State?) _____

Wife or Husband's Name: _____

Name of Beneficiary: _____

Address and Phone number of Beneficiary _____

Why do you want to join our Chapter? _____

Do you believe in God? _____

Are you willing to work with people? _____

Are you willing to wear white (i.e., dresses with ¾ length or long sleeves, white shoes w/white heels, plain white hose, white purse and white gloves)? _____

Are you willing to pay dues and assessments to the chapter and the Grand Chapter? _____

Have you ever been convicted of a felony? _____

If so, why and when? _____

Have you ever belonged to any group/organization claiming to be affiliated with the Eastern Stars? _____

Have you ever made application to any other Prince Hall group/organization or affiliated group or organization and were rejected? _____

What caused you to petition this Chapter for Membership? _____

I, _____, certify that all the above information is true to the best of my knowledge and give this Chapter and Cecelia Dunlap Grand Chapter, O.E.S., of Kentucky my permission to verify the above information through any agency necessary.

(Signature **and** Date of Petitioner)

Recommendation of Committee: Favorable: _____ Unfavorable: _____ (If unfavorable, state reason)

Committee Member: _____ Committee Member: _____

Committee Chairperson: _____

Date of Investigation: _____