

# Requirements for Nomination and Selection

as

## Outstanding Sigma of Southern Region (OSSR) of Phi Beta Sigma Fraternity, Inc.

### A. General Membership OSSR Requirements

1. Must be an alumni brother in good standing with local graduate chapter.
2. Must be nominated by local alumni chapter.
3. Must be an alumni brother in good standing with state.
4. Must be an alumni brother in good standing with the Region.
5. Must be an alumni brother in good standing with National Office.
6. Must have been member of Phi Beta Sigma Fraternity, inc. for five (5) years.
7. Must have a strong record of Service to Sigma.
9. Must complete the application and be approved by his state.
10. Must be present at the Regional conference at time of induction.

### B. Special Membership

1. DSC Member relocating to Southern Region.
2. Brother relocating to Southern Region and designated as “ Outstanding” from previous region.

### C. Limitations

Each state can submit two names for consideration at the Regional Conference.

### D. Evidence of membership:

Each brother designated as an Outstanding Sigma of Southern Region will be presented with a pin and certificate at time of induction.

William D. Fails, President

## Outstanding Sigmas of Southern Region

# PHI BETA SIGMA FRATERNITY, INC. OUTSTANDING SIGMAS of SOUTHERN REGION APPLICATION/CITATION

### MEMBERSHIP GUIDELINES

**THE OUTSTANDING SIGMAS OF SOUTHERN REGION (OSSR)** is the highest honor given to a brother of this fraternity at the Regional level. This honor is granted to a deserving brother by the members of his State pending approval of the Southern Region's body during their annual Regional Conference. For a member to receive this honor, he must be recommended by his Alumni Chapter, in writing, to his State's OSSR Committee. The following criteria are to be used:

- I. **REQUIREMENTS:** In order to be considered for membership into the **OSSR**, a brother must meet the following requirements:
  - A. A current financial member of an Alumni Chapter of the Fraternity (Local, State, Regional, and National).
  - B. A strong Alumni and/or Collegiate leadership record.
  - C. A strong State leadership record.
  - D. A strong Regional and/or National leadership record.
  - E. A minimum of five (5) years of service to the fraternity.
  - F. Exemplify a strong sense of brotherhood.
  - G. A strong Professional/Occupational and/or Community Service record.
  - H. A letter of recommendation and completed Application Form from the Alumni Chapter of which the brother is a member. **The application should be typed or printed neatly in ink and must be signed by the local Chapter President and local Chapter Secretary. When submitting for Regional consideration, the application must be signed by the State (OSSR) Committee Chair and State Director. Please provide the State Conference with a printed hard copy and email electronic copies to the State Secretary and chairman of the State OSSR Committee Chair. Attachments are acceptable if needed. Appearance does count toward final Application score.**
  - I. **State of Georgia Requirement Only: All applications must be submitted to the State Secretary 45 days before the beginning of the State Conference.**

II. **QUALIFICATIONS:** In order to qualify for membership in this chapter, a brother must be involved in the promotion of, but not limited to, two (2) or more of the following Phi Beta Sigma programs/activities during his tenure as a Sigma Man on an ongoing basis:

- A. Bigger and Better Business
- B. Education
- C. Social Action
- D. Sigma Beta Club/S.A.T.A.P.
- E. Sigma Shadows' Program
- F. Sigma/Zeta Relationships
- G. Giving unquestionable service to the organization as deemed out of the realm of the individual's responsibility but due to his own devotion and commitment to **Service and Humanity**.
- H. Any other meritorious service recognized by his Chapter, State, Region, and/or National as being deserving of such honor(s)

III. **THE SELECTION PROCESS:**

- A. The Alumni Chapter from which the brother is a member must submit a letter of recommendation with a completed application to the **State OSSR** Committee on or before the designated deadline of each year. **This application/citation is to be used for Southern Region STATE AND REGIONAL SUBMISSIONS. If submitting for the State OSSR the same protocol must be followed as for the Region.**
- B. The OSSR Committee will make the selection based on the guidelines set by the committee.
- C. State members of the OSSR Chapter will present their candidate at their State Conference for ratification by the State body. Once ratified by the State, the State Outstanding Sigma of the Southern Region Committee will decide whether or not to forward the application for Region Chapter consideration.
- D. The candidate's letter of recommendation and application will be presented to the **OUTSTANDING SIGMAS OF SOUTHERN REGION** for acceptance and to the State/Regional body for **RATIFICATION**.

These membership guidelines were prepared and submitted by Brothers Earl Davis and Fraizer Mungin on March 26, 1988.

This Committee/Award was ratified by the Southern Region in 1988

**PHI BETA SIGMA FRATERNITY, INC.**  
**DISTINGUISHED SERVICE CHAPTER-SOUTHERN REGION**  
**MEMBERSHIP APPLICATION**

Please type or print neatly in ink

**DATE:** \_\_\_\_\_

**PERSONAL DATA:**

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Place of Birth: \_\_\_\_\_

Current Address (Number/Street): \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Home #: \_\_\_\_\_ Work#: \_\_\_\_\_ Email: \_\_\_\_\_

**Marital Status:** Single \_\_\_\_\_ Married \_\_\_\_\_ Divorced \_\_\_\_\_ Widowed \_\_\_\_\_

**EDUCATION (attachments may be used if necessary):**

**1. Post Secondary Education Information:**

A. College/University \_\_\_\_\_

City/State \_\_\_\_\_

B. Major/Minor \_\_\_\_\_

C. Degree Earned \_\_\_\_\_

E. Year of Completion \_\_\_\_\_

**2. Graduate Studies (if applicable):**

A. Institution(s) \_\_\_\_\_

City/State \_\_\_\_\_

B. Field(s) of Study \_\_\_\_\_

C. Degree(s) Earned \_\_\_\_\_

**OCCUPATION/PROFESSION** \_\_\_\_\_

Current Place of Employment \_\_\_\_\_

Professional Certification(s)/Year earned \_\_\_\_\_

\_\_\_\_\_

**PHI BETA SIGMA FRATERNITY MEMBERSHIP INFORMATION:**

1. Year of Initiation \_\_\_\_\_
2. Initiated Chapter \_\_\_\_\_
3. School (if applicable) \_\_\_\_\_
4. Initiated Chapter City/State \_\_\_\_\_
5. How long has the applicant been the member of a Chapter(s) in the Southern Region?  
(Years) \_\_\_\_\_
6. Position(s) held in Phi Beta Sigma Fraternity (attachments may be used if necessary)
  - A. Local(Collegiate and/or Alumni) \_\_\_\_\_
  - B. State \_\_\_\_\_
  - C. Regional \_\_\_\_\_
  - D. National \_\_\_\_\_
7. Which of the following activities has the applicant been actively involved in during his tenure as a Sigma Man? (Please check below A thru F)
  - A. Bigger and Better Business \_\_\_\_\_
  - B. Education \_\_\_\_\_
  - C. Social Action \_\_\_\_\_
  - D. Sigma Beta Club/S.A.T.A.P. \_\_\_\_\_
  - E. Sigma Shadows' Program \_\_\_\_\_
  - F. Sigma/Zeta Relationships \_\_\_\_\_
  - G. Giving/gave unquestionable service to the fraternity as deemed out of the realm of the individual's responsibility, due to his own devotion and commitment to Service and Humanity; Please explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
8. Why does your Chapter feel the applicant is qualified to become a member of this Chapter? Please explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

9. Has the applicant received any recognition or awards for meritorious service from the Chapter, State, Region and /or National? Please list (attachments may be used if necessary).

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

10. Has the applicant received any other recognition or awards on a Professional, Occupational, or Community level? Please list (attachments may be used if necessary)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**If submitting for State DSC-SR Chapter Consideration, the following signatures are required:**

Submitted By: \_\_\_\_\_ **Chapter**

**Chapter President** \_\_\_\_\_ **Date:** \_\_\_\_\_

Signature

Chapter President-Printed Name \_\_\_\_\_

*(If the current Chapter President is up for consideration, the First-vice President may sign in place of the President)*

**Chapter Secretary** \_\_\_\_\_

Signature

Chapter Secretary-Printed Name \_\_\_\_\_

**If submitting for Region DSC-SR Chapter Consideration, the following additional signatures are required:**

**State Committee Chair** \_\_\_\_\_ **Date:** \_\_\_\_\_

Signature

State Committee Chair-Printed Name \_\_\_\_\_

**State Director** \_\_\_\_\_ **Date:** \_\_\_\_\_

Signature

State Director-Printed Name \_\_\_\_\_

*(If the current State Director is up for consideration, the First-vice State/Region Director may sign in place of the State Director)*

# DISTINGUISHED SERVICE CHAPTER-SOUTHERN REGION APPLICATION SCORING SHEET

For State/Region DSC-SR Committee use only

NAME OF APPLICANT \_\_\_\_\_

	<u>POINTS</u>	<u>TOTALS</u>
<b>I. Positions Held:</b>		
A. Local: 1 or more,	5 points	
B. State: 1 or more,	5 points, Director 10 points	
C. Regional: 1 or more,	10 points	
D. National: 1 or more,	10 points	
Total potential points/Total points earned _____	<b>30</b>	_____

<b>II. Programs/Activities:</b>		
A. Bigger and Better Business:	5 points	
B. Education:	5 points	
C. Social Action:	5 points	
D. Sigma Beta Club/S.A.T.A.P.:	5 points	
E. Sigma Shadows:	5 points	
F. Sigma/Zeta Relationship:	5 points	
G. Service Awards: 5 points each up to 4	20 points	
Total potential points/Total points earned _____	<b>50</b>	_____

<b>III. Chapters' Letter of Recommendation for Qualification</b>		
Total potential points/Total points earned _____	<b>10</b>	_____

<b>IV. Phi Beta Sigma Recognition Awards</b>		
A. Chapter:	1 Award 5 points-2 or more Awards	10 points
B. State:	1 Award 10 points-2 or more Awards	20 points
C. Regional:	15 points	
D. National:	5 points	
Total potential points/Total points earned _____	<b>50</b>	_____

<b>V. Profession/Occupation/Community Recognition Awards</b>		
1 Award 5 points up to 10-10 or more Awards 50 points		
Total potential points/Total points earned _____	<b>50</b>	_____

<b>VI. Overall Appearance of Application</b>		
Total potential points/Total points earned _____	<b>10</b>	_____

Total Potential Score \_\_\_\_\_ **200**

**TOTAL RATED APPLICATION SCORE:** \_\_\_\_\_

**SCORE PERCENTAGE (Rated Score/Total Potential Score)** \_\_\_\_\_

Committee Chair \_\_\_\_\_ Date \_\_\_\_\_

Signature

Committee Chair- Printed Name \_\_\_\_\_