Council Woman of the Year Evaluation Form

Chapter Participation

	Number of Chapter Activities Held	Number of Chapter Activities Attended
1. Chapter Meetings		
2. Chapter Socials		
3. Chapter Service		
4. Chapter Ways & Means		
5. Number of Programs Given		
6. Number of Meetings (Hosted & Co-Hosted)		
7. Number of Chapter Socials (Hosted & Co-Hosted)		

8. Attended Area Convention Yes_____ No_____

9. Attended State Convention Yes_____ No_____

10. Elected Offices Held if Any_____
(Current Year Only)

11. **Chapter Committees**
(Current Year Only)

	Served as Chairman	Member of
Program		
Membership		
Social		
Ways & Means		
Service		
Yearbook		
Scrapbook		
Hospitality		
Publicity		
Telephone/Contact		
Other (Specify)		

12. List any Chapter Awards received during the current BSP calendar year._____
_____

Woman of the Year's Name

Chapter Name

Name & Phone Number of Individual Responsible for this Evaluation:

Name_____ Phone ( )_____

Is this a Secret?_____ Is this a Career or Traditional Chapter?_____

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Council Participation

13. Number of City Council Meetings Attended_____

14. Attended Beginning Day	Yes_____	No_____
15. Attended Founder's Day	Yes_____	No_____
16. Attended Valentine Ball/Tea	Yes_____	No_____
17. Attended Council Social	Yes_____	No_____

18. City Council Officer (Office Held for Current Year Only)_____

19. **City Council Committees**	Served as Chairman	Member of
Membership		
Bylaws		
Scrapbook/Yearbook		
Chapter of the Year		
Service/Hospitality		
Roster		
Beginning Day		
Woman of the Year		
Telephone		
Publicity		
Special Committees (Please Name)		

*20. Why should your candidate be selected City Council Woman of the Year?

_____
_____
_____
_____
_____

(Use Additional paper or the back of this form if needed)

21. Please check the type of gift you believe your Woman of the Year would prefer to receive.

- ☐ Silver
- ☐ Wicker
- ☐ Brass
- ☐ Pewter
- ☐ Crystal
- ☐ Other

Woman of the Year's Name

Chapter Name

**Please include outside organizations, church & clubs she is affiliated with. It is helpful to also include number of years in Beta Sigma Phi, occupation, marital status and number of children and/or grandchildren.*

Please return this form (page 1 & 2) in a sealed envelope by the April Council Meeting!