



# Lambda Kappa Sigma

## Ethel J. Heath Scholarship Key Certification Form

(This form must be submitted during the spring semester of the candidate's graduation year. Please print or type.)

### SECTION ONE: TO BE COMPLETED BY THE LKS CHAPTER PRESIDENT

Chapter Name: \_\_\_\_\_ Date of Submission: \_\_\_\_\_  
Candidate's Name (as it should appear on the certificate): \_\_\_\_\_  
Candidate's Address: \_\_\_\_\_  
City/State/ZIP: \_\_\_\_\_ Candidate's Cell Phone: \_\_\_\_\_  
Candidate's Email: \_\_\_\_\_ Year of LKS Initiation: \_\_\_\_\_  
Candidate is a member in good standing with the chapter: Yes \_\_\_\_\_ No \_\_\_\_\_  
Candidate is a member in good standing with the Fraternity: Yes \_\_\_\_\_ No \_\_\_\_\_  
Chapter President's Name (please print): \_\_\_\_\_  
Chapter President's Signature: \_\_\_\_\_

### SECTION TWO: TO BE COMPLETED BY DEAN OR OTHER CAMPUS OFFICIAL

I hereby certify that (candidate's name) \_\_\_\_\_ is a candidate for graduation from (school name) \_\_\_\_\_ on (date) \_\_\_\_\_. As of (today's date) \_\_\_\_\_, I certify that the candidate ranks in the top 10% (ten percent) of the graduating class.  
Your name (please print): \_\_\_\_\_ Title: \_\_\_\_\_  
Your signature: \_\_\_\_\_

### SECTION THREE: (Complete only if certificate/key are to be mailed to someone other than candidate.)

Please mail the award certificate and key to:

Name: \_\_\_\_\_ Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
City/State/ZIP: \_\_\_\_\_ Email: \_\_\_\_\_

The award will be presented during a special event to be held on (date): \_\_\_\_\_

NOTE: There is no charge for the award certificate or key. They are a gift from the Fraternity to each qualified LKS member in good standing.

Email or mail this completed form to the LKS Headquarters Office. Allow 4-6 weeks for delivery.