



LAMBDA KAPPA SIGMA

Ruth Davies Flaherty Service Award

Chapter Name: _____ Date of Submission: _____

Name of Awardee (as it should appear on the certificate): _____

Address: _____ Home Phone: _____

City/State/Zip: _____ Cell Phone: _____

(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 _____

Complete the section below only if certificate is to be mailed to someone other than the awardee

Please mail the award certificate to:

Name _____ Title: _____

Address _____ Best Phone: _____

City/State/Zip: _____ Email: _____

The award certificate will be presented to candidate during a special event to be held on: (date) _____

Chapter President's Signature: _____

NOTE: There is no charge for the award certificate. Send this completed form to the LKS International Office. Allow 2-4 weeks for delivery.