

# Multicultural Greek Council at The Ohio State University

## MCGC Pairing Completion Form

Your Chapter: \_\_\_\_\_

Your Pairing(s): \_\_\_\_\_

Date Completed Event: \_\_\_\_\_

Please give a brief description of what you and your pairing did at this event.



Chapter President Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Chapter Delegate Signature: \_\_\_\_\_

Date: \_\_\_\_\_

\*Failure to complete 1 pairing event by the end of the semester will result in a \$20 fine.

\*\* 50% attendance per organization is required