



TAU BETA SIGMA ADVISING CHAPTER REPORT

Photocopy Only!



INSTRUCTIONS: This report should be filed with the National Headquarters on the 1st of each month during the colonization process. Please keep a copy for your records. This report should be filed with the National Vice President of Colonization & Membership & National Headquarters on the 1st of each month during the colonization process. Please return the completed form to: tbscolony@kkytbs.org.

Sending in Mail: Tau Beta Sigma, National Headquarters, P.O. Box 849, Stillwater, OK 74076-0849

Colony: _____ TBS Chapter Reactivating (if applicable): _____
 School: _____
 District: _____ Date Filed: _____
 Colony that your Chapter is advising: _____
 This report was prepared by: _____

SECTION I – COLONY COMMUNICATION

Last contact with Colony: _____ Date: _____
 Mail () E-mail () Phone () Visit () Other () _____

Type and frequency of contact (number of times you have had contact in each of the following) since last report:

Mail: _____ E-Mail: _____ Phone: _____
 Visit: _____ Other: _____

Issues discussed/Workshops presented:

SECTION II – ADVISING PERSON COMMUNICATION

Last contact with Advising Person: _____ Date: _____
 Mail () E-mail () Phone () Visit () Other () _____

Type and frequency of contact (number of times you have had contact in each of the following) since last report:

Mail: _____ E-Mail: _____ Phone: _____
 Visit: _____ Other: _____

Issues discussed/Workshops presented:

SECTION III – DISTRICT GOVERNOR/COUNSELOR/OFFICER COMMUNICATION

Last contact with District Governor/Counselor/Officer: _____ Date: _____
 Mail () E-mail () Phone () Visit () Other () _____

Type and frequency of contact (number of times you have had contact in each of the following) since last report:

Mail: _____ E-Mail: _____ Phone: _____
 Visit: _____ Other: _____

Issues discussed/Workshops presented:

SECTION IV – SPONSOR/DIRECTOR OF BANDS COMMUNICATION

Last contact with Sponsor/Director of Bands: _____ Date: _____
Mail () E-mail () Phone () Visit () Other () _____

Type and frequency of contact (number of times you have had contact in each of the following) since last report:

Mail: _____ E-Mail: _____ Phone: _____
Visit: _____ Other: _____

Issues discussed/Workshops presented:

SECTION V – COLONY ASSISTANCE

1. In what way is your chapter helping the colony?

- A. Service Projects

- B. Fund-raising Projects

- C. Social Activities

- D. Officer Responsibilities

- E. Petitioning Documents

- F. Constitution

- G. Membership Education

2. What is your evaluation of the progress being made by the Colony?

SECTION VI – SIGNATURE

Note: A Colony Liaison is an active member of the advising chapter who has been given the responsibility to coordinate and communicate with the colony of which the chapter is advising.

Colony Liaison Date Signed

This comprehensive report must be submitted to the National Vice President of Colonization & Membership & National Headquarters of Tau Beta Sigma by the 1st of each month.