

Delta Epsilon Mu

UCLA Chi Chapter

Interested Student Application Fall 2025

Complete the following questions in the space provided. Answers must be typed and single-spaced. Please attach a photo of yourself, your Fall Quarter class schedule, your Resume, and your Degree Audit Report as a PDF.

DISCLAIMER: Prospective members are assessed on their performance during recruitment, level of interest in Delta Epsilon Mu, ability to work with others, leadership potential, and academic performance. The purpose of collecting your schedule is so that we may best plan future meetings and events according to all the schedules that we will receive. Your schedule will not be used during the selection for the Prospective Alpha Gamma Class. Only the schedules of those who receive a bid will be reviewed.

Last Name: _____ **First Name:** _____ **Pronouns:** _____

Email: _____ **Phone Number:** _____

Major: _____ **Minor (if applicable):** _____

Year in School: _____ **Cumulative GPA (min. 3.0):** _____

Expected Graduation Date: _____

Career Goal Interest(s): _____

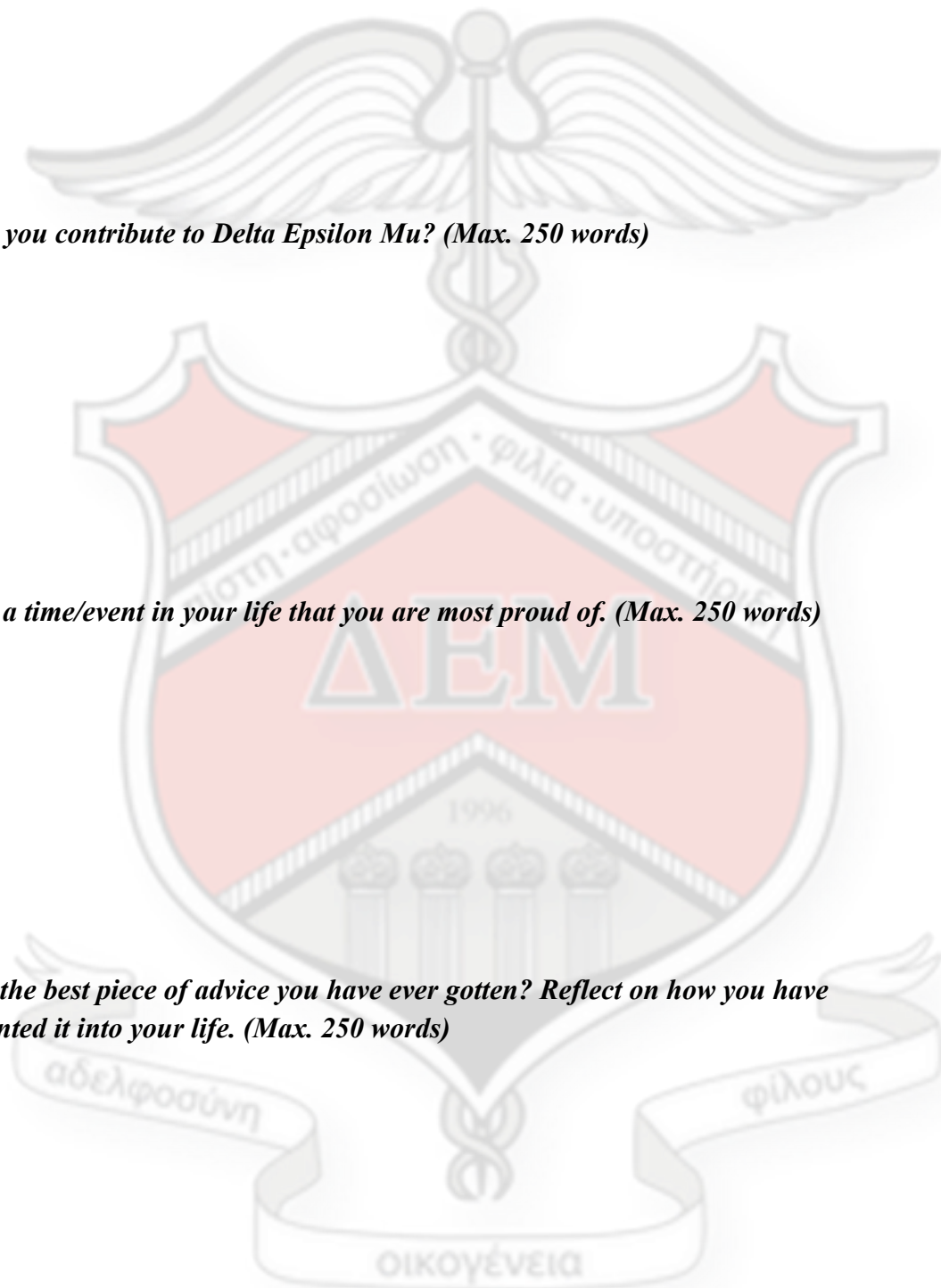
List extracurriculars and commitments for the quarter and the number of hours per week:

Why do you want to join Delta Epsilon Mu? (Max. 250 words)

How will you contribute to Delta Epsilon Mu? (Max. 250 words)

Describe a time/event in your life that you are most proud of. (Max. 250 words)

What is the best piece of advice you have ever gotten? Reflect on how you have implemented it into your life. (Max. 250 words)



Please read the following and electronically sign below:

I, _____, request to be reviewed and considered to become a member of Delta Epsilon Mu. I am aware that before I am considered an active member of Delta Epsilon Mu, I will be required to successfully complete an orientation process. I am aware that my participation in the orientation process coordinated by Delta Epsilon Mu is entirely voluntary, and I may decline to proceed with any, and all, activities at any point during the orientation process. I will not hold any member of the supervising chapter of Delta Epsilon Mu liable for any damages, loss of personal belongings, or personal injury in the very unlikely event such may occur during this period and upon completion of the orientation process of Delta Epsilon Mu. I am aware that I will be subject to the same processes, rules, and regulations for membership as all members of Delta Epsilon Mu have experienced and completed before me, and as subsequent prospective members will undergo in the future.

Signature: _____

Date: _____

Again, please remember to attach a photo of yourself, your Fall Quarter class schedule, Resume, and your Degree Audit Report as four separate attachments.

Applications are due on **Thursday, October 2nd, 2025, at 11:59 PM**. Please email your application **as a PDF** to demuclavprecruitment@gmail.com with the subject heading “DEM Application – Last Name, First Name” and file name as “First Name Last Name DEM Application.” Interviews will be held on **Saturday, October 4th, 2025, from**

8:00 am-12:00 pm.

If you have any questions, please contact our **Co-Directors of Recruitment, Rishi Chandrasekar and Isaiah Barrera**, via email at demuclavprecruitment@gmail.com.