

Upstate Youth Program & College Fair

Correction Sheet

Please circle the corrected to be made

| Name: | | | | |
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| Category: | | | | |
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| School: | | | | |
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| Class: | | | | |
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| Phone: | | | | |

IMPORTANT: Please return this form to the Gamma Gamma Lambda Chapter Table before leaving the event.

Corrected Certificates will be sent to your High School's Guidance Counselor's Office by April 8th.

Contact your High School Guidance Counselor's Office (preferred), contact Bobby Clark at 864-656-0950 or send a fax to 864-656-8120 with any further corrections.

All corrections must be received by April 1st at 4:00 p.m. for Year 2009.