**TEXAS STATE ORGANIZATION NOTIFICATION FORM**

**TEXAS FACILITY NAMED FOR A DELTA KAPPA GAMMA MEMBER**

Honoree’s name

[ ]  Member of the Society

[ ]  Honorary Member

Name of building/parts of building(s)/other facilities which honor(s) the DKG member

Member’s chapter

Geographic location of the building/facility

City

County

Date of construction/dedication (if available)

Name of sponsoring entity (school district, university, city, county, etc.)

Other pertinent details if applicable

**Submit notification form to:**

TSO Research Chairman