

ESO
EPSILON SIGMA OMICRON
Epsilon ten sautou hoden
“Enlighten your own pathway”

ESO is an honorary educational society open to all per capita paying GFWC members. ESO is a permanent part of the GFWC Education Department. The purpose of ESO is to promote a commitment to lifelong learning and self-improvement through reading. It is intended to offer a path to self-enrichment and personal growth for members.

GOALS:

- To encourage clubwomen’s pursuit of higher education
- To create an additional means to unite women in volunteerism
- To develop a support network for women returning to school
- To improve current and develop new study skills
- To stimulate systematic home reading and study with minimum supervision
- To encourage the establishment of home libraries and greater use of public libraries
- To encourage the formation of reading/study/discussion groups

RESPONSIBILITIES:

ESO members are encouraged to participate in club programs such as

- Reading
- Participating in reading/study/discussion groups
- Working to achieve higher ESO levels
- Continuing to pursue self-improvement through personal study

Reading is, of course, the main responsibility of an ESO member. Members may read from an ESO published reading list (available at www.GFWC.org/ESO) or they may choose alternate titles. A report form must be maintained by each member and forwarded to the local chairperson, who, in turn, will forward report totals to the state ESO chairperson. Reporting is usually done once per year. State ESO chairs will issue certificates and awards based on report forms received.

Please complete and retain this document for your records
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ESO PLEDGE APPLICATION

Name: _____

Address: _____

Phone number: () _____

I hereby agree to pursue the goals of ESO and to participate in ESO programs.

Signature _____ Date _____

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Please complete and return to the person listed at the bottom of the page

ESO PLEDGE APPLICATION

Name: _____

Address: _____

Phone number: () _____

E-mail address: _____

I hereby agree to pursue the goals of ESO and to participate in ESO programs.

Date _____

Signature _____

_____ I wish to receive and send my reading record by e-mail. (I prefer to record the titles and authors on my computer.)

_____ I wish to receive and send my reading record by postal mail. (I prefer to record the titles and authors on paper.)

Please return to Julie Dart * 501 S. Stine Rd.* Charlotte, MI 48813