

Guidelines for Conducting Membership Intake

In order to ensure a safe and seamless membership intake process it is necessary that the Fraternity and Sorority Life Office establish a timeline for membership intake procedures. This packet will assist organizations in planning and conducting membership intake programs for the upcoming semester.

The completion of these documents is required for all chapters that participate in membership intake at the University of North Carolina at Pembroke. It is important that the all guidelines are followed, failure to do so will result in actions being taken by the Fraternity and Sorority Life Office, Student Conduct as well as contacting respective chapter's advisor and national headquarters.

Privacy Statement To protect the interests, privacy and confidentiality of the students involved in the membership intake process no one other than the Fraternity and Sorority Life Office will have access to these documents. While access to these documents will be restricted, university administrators, chapter advisors, and/or representatives from the national headquarters.

Important Dates Fall 2019 Intake

Intake Window Opens: Wednesday, August 14, 2019

Notice of Membership Intake Form due: Friday, September 13th, 2019 at 5:00pm

Fall Break (No Intake Activities): Thursday, October 17 – Sunday, October 20

Intake Window Closes: Tuesday, November 12, 2019

Please return completed forms to:

Fraternity and Sorority Life Office

James B. Chavis University Center Suite 225

910.775.6482 |greek@uncp.edu|

TABLE OF CONTENTS

- Expectations For Chapters Conducting Intake Page 3
- Process for Organizations Conducting Intake Page 4
- Notice of Membership Intake Form Page 5
- Anti-Hazing Policy Compliance Form Page 6
- Verification of Aspirants Form Page 7, 8
- New Member Roster Addition Form Page 9
- New Member Presentation Form Page 10
- Example New Member Education Calendar Page 11
- Checklist for Chapters Conducting Intake Page 12

Expectations of Chapters Conducting Membership Intake

- 1. When available, all prospective members will participate in any mandated programming by the Fraternity and Sorority Life Office.
- 2. The membership activities will not interfere with academic endeavors or class schedules.
- 3. The selection of new members will be free of any form of mental and/or physical abuse and hazing.
- 4. Chapters will not engage in pre or post hazing activities.
- 5. Chapter advisor(s) will be present at all membership related activities.
- 6. Chapters will complete all required paperwork in a timely fashion.
- 7. No membership activity includes the presence or consumption of alcohol.
- 8. Prospective members will be made aware of the University of North Carolina at Pembroke Hazing Policy.
- 9. All membership intake activities are to be conducted in compliance with each inter/national Organization's intake guidelines and process.
- 10. Organizations will comply with outlined membership intake guidelines of the Fraternity and Sorority Life Office.

Violations:

Violations of the membership intake process may result in probation or suspension. Whether the chapter will be placed on probation or receive automatic suspension is based upon the infractions and is at the discretion of the Fraternity and Sorority Life Office and the Office of Student Conduct.

Violations include, but are not limited to:

1. Intentional submission of improper paperwork (i.e., changing of dates on forms, falsifying original

Signatures, incomplete paper work, etc.)

- 2. Holding membership intake without conforming to the Guidelines for Conducting Membership Intake Packet.
- 3. Hazing: Any violations will result in a referral to the Office of Student Conduct
- 4. Failure to adhere to New Member Presentation Guidelines.
- 5. Distributing promotional materials (i.e. Instagram, Twitter Snapchat, etc.) to inform students of intake without meeting prior with the a Fraternity and Sorority Life Advisor

Process for Organizations Conducting Membership Intake

- 1. Chapters can only begin the membership intake process with approval from their sponsoring Alumni/ae Chapter and/or Regional/National officer.
- 2. Chapters must submit a Notice of Membership Intake Form via BraveConnect by <u>September 13</u>, <u>2019 at 5:00pm</u> if your chapter plans to conduct membership intake for the <u>Fall 2019 semester</u>.
- 3. The Chapter President and New Member Educator MUST meet with the Fraternity and Sorority Life advisor to discuss the intake calendar and university policies. This meeting must occur 5 business days before any intake activity can begin. To schedule an appointment, call (910) 775-4307 or email greek@uncp.edu.

At this meeting, provide the following documents:
□ Any National/Regional paperwork that needs to be signed by FSL staff
□ Completed Notice of Membership Intake Form (Attached)
□ Completed Anti-Hazing Policy Compliance Form (Attached)
□ A copy of the Informational Flyer (emailed to greek@uncp.edu or printed)
□ New Member Education/Intake Calendar (Example Attached) - This schedule should be a detailed syllabus that includes name of activity, date, time, and location, of all intake activities - meetings, service events, study hours, new member presentation practices, initiation dates, etc.)

- 4. Informational Meeting: A representative from the *Fraternity and Sorority Life office MUST give a hazing presentation at your organization's informational meeting*. This will last no longer than 10 minutes.
- 5. Verification of Aspirants Form (Attached): This form is the list of the individuals approved by your chapter that will be submitted to your regional or national representatives as aspirants for membership. This form *MUST be submitted within 24 hours or by 5:00pm the next business day after the interest/informational meeting*, and prior to the start date of the official process/education of aspirants listed on the chapter's intake calendar.
- 6. New Initiates Form (Attached): Members who have successfully completed the membership process. *Must be submitted within 24 hours or by 5:00pm next business day after initiation*.
- 7. New Member Presentation Form (Attached): For chapters that will present new members with a formal presentation. *Must be submitted within 5 business days of scheduled presentation date*.



Notice of Membership Intake

The	chapter of	will be conducting
membership intake.		
In the Fall or Spring (cir	rcle one) semester of (year):	
Date of Interest meeting	g(s) (mm/dd/yyyy):	
New Member Education	n/Intake Period Start Date:	
New Member Education	n/Intake Period End Date:	
New Member Initiation	Date:	
New Member Presentat	ion Date:	
	rrect and accurate to the best of our knowledge. Life Advisor must approve any changes to t	this document.
Email:	Phone Number:	
Signature:		
Chapter New Member I	Educator:	
Email:	Phone Number:	
Signature:		
Chapter Advisor:		
Sponsoring Graduate Cl	hapter:	
Email:	Phone Number:	
Signature:		

As the advisor of this chapter, I have agreed and approved all activities associated with the membership intake process and will be present during all activities. I agree to insure that the organization will comply with university rules and regulations governing the intake program. I agree that the above information is correct and understand that by signing my name I agree to uphold all University of North Carolina at Pembroke and Inter/National Headquarters policies.



Anti-Hazing Policy Compliance Form

Due One Week Before Any Intake Activities May Begin

The University of North Carolina at Pembroke prohibits hazing in any form. All fraternities and sororities must file this form with the Fraternity and Sorority Life Office before any intake activities may begin.

The University of North Carolina at Pembroke Hazing Policy

No student(s), organization(s), or athletic team(s) shall conduct or condone hazing activities. Hazing is defined as: "Any action taken or situation created intentionally or unintentionally, with or without consent of the person being hazed, whether on or off campus, to produce mental or physical discomfort, embarrassment, harassment, ridicule, or any other activities which are not consistent with academic achievement, and the regulations and policies of UNC Pembroke, or North Carolina state law (see Student Handbook Section Administrative Policies)

To report hazing confidentially, visit:

 $(\underline{https://www.uncp.edu/campus-life/campus-engagement-and-leadership/fraternity-and-sorority-life/hazing-prevention/how})$

Hazing Agreement

We, the undersigned, certify the following:

- 1. We have read AND understand the University of North Carolina at Pembroke Hazing Policy.
- 2. We have read AND understand our National Organization's Hazing Policy.
- 3. We verify that this policy will be read to our chapter.
- 4. We verify that all activities sponsored and/or required by our chapter, in whole or part, comply with this policy.
- 5. We verify that all our new members will be fully initiated, using all local and national ceremonies, by the established initiation deadline.
- 6. We further verify that all new member activities will be completed prior to midnight.
- 7. Failure of my organization to uphold this policy will result in the referral of:
 - a. My organization to the discipline of the Fraternity and Sorority Life and or Student Conduct Office
 - b. Any individual members to the campus police for criminal prosecution
 - c. The president and new member educator/intake coordinator for supplying false information to the University (if they knew of hazing and didn't take the steps to stop it)

By signing this form we agree to abide by the above.

Fraternity or Sorority:	
Chapter President (signature, date):	
Membership Intake Officer (signature, date):	



Verification of Aspirants Form

Fraternity/Sorority					
meeting and are consid	at on (date of mtg.) dering the process of membership seldending the decision of the regional/na Signature-Chapter President	ection. If select ational/ represe	ed, these aspiran		
					l Sorority Life out this section
Please Print Aspirant's Name	Signature: I wish to waive my rights gr the Family Educational Rights and Priv and permit UNCP to release academi	acy Act of 1974	Banner ID	Hours Completed	Cumulativ GPA

				Fraternity and	Sorority Life out this section
	Please Print Aspirant's Name	Signature: I wish to waive my rights granted to me by the Family Educational Rights and Privacy Act of 1974 and permit UNCP to release academic and student conduct information about me to my Sorority/Fraternity. I understand that this wavier will be in effect until I notify the Fraternity/Sorority Life Office that no longer wish to allow such information to be released.	Banner ID	Hours Completed	Cumulative GPA
1			840		
2			840		
3			840		
4			840		
5			840		
6			840		
7			840		
8			840		
9			840		
10			840		
11			840		
12			840		
13			840		
14			840		
15			840		

			Fraternity and Office will fill	l Sorority Life out this section
	Please Print Aspirant's Name	Banner ID	Hours Completed	Cumulative GPA
16		840		
17		840		
18		840		
19		840		
20		840		
21		840		
22		840		
23		840		
24		840		
25		840		
26		840		
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29		840		
30		840		
31		840		
32		840		
33		840		
34		840		
35		840		

Department Use Only:	Date Received:



NEW MEMBER ROSTER ADDITION FORM CONSENT TO RELEASE STUDENT RECORDS

NAME:(pleaseprint)		ORGANIZATION:	
BraveMail:	_@bravemail.uncp.edu	PHONE:	
Student Identification Number	er:		
Scholarship Chair, Chapter Acthis information will be used consideration, verification of the fraternity/sorority system	ademic report (semester and cumu dvisors, and to the National Headqua in reporting for Fraternity and Soro registration, and minimum chapter go at UNC Pembroke. If I no longer wi o Fraternity and Sorority Life. I und	lative GPA) to the France of the organization of the organization of the contract of the contr	ion listed above. I understand that nining my eligibility for scholarship ts, for as long as I am affiliated with s released, I understand that I must
	<u>ANTI-HAZING AG</u>	REEMENT	
are not only harmful but also here initiation; and that if I am lead and North Carolina State Law including but not limited to lead disciplinary action. I know the but not limited to, Campus En Headquarters and/or local posorority Life, located in the U By signing this document, I described in the U	(please pris policies against hazing. I understant have no place in Greek-letter organizathazed, my chapter is violating the policies. I understand that my participation loss of membership and other privileg at if I become aware of any hazing a gagement and Leadership, Division of colice department. To initially report iniversity Center room 225, by phonor on hereby agree to the terms and stand the release of my student records	Id what constitutes hat tions. I know that hazi blicies of the University in hazing activities males, as well as subjectivities, I should notiful fistudent Affairs, Studit incidents of hazing, a 910-775-4307 or emutements listed above	ing cannot be a part of my education y, their (inter)national organization, y result in numerous consequences ing myself to University and/or legal fy the proper authorities, including, lent Conduct, National Organization please contact the Fraternity and ail greek@uncp.edu.
MEMBER SIGNATURE			DATE
CHAPTER PRESIDENT SIGN	ATURE		DATE
ACADEMIC SEM	FOR OFFICE USE		R SO JR SR 5-yr
RECEIVED ON:	*PREVIOUS SEMESTER *If first semester freshman, plea RECEIVED BY: _ EDGEMENT: (DIRECTOR)	se list high school G	PA
	(2.1123.011)		



New Member Presentation Form

Due 10 Business Days Prior to New Membership Presentation

Fraternity/Sorority Name:
Please Print

If Location is outdoors, it is highly encouraged to secure an indoor back-up location.

	Location	Date	Time: From - To
	Primary Location:		
Sample	The Water Feature	10/15/19	7:12pm- 9:12pm
San	Rain Location		
	UC Annex	10/15/19	7:12pm- 9:12pm
Actual			
Act			



Example Membership Intake Calendar/Schedule

Date	Function	Location	Time: From - To
10/15/2019	Education Session 1	UC Annex	6pm – 10pm
10/16/2019	Education Session 2	Old Main 231	6pm – 10pm
10/18/2019	Ritual #2	Pine Cottage	1pm – 7pm
10/20/2019	Presentation practice	UC Annex	7pm – 9pm
11/07/2019	New Member Initiation	Aux Gym	5pm-8pm
11/11/2019	New Member Presentation	Main Gym	7:14pm – 9:14pm

^{*}Chapter may submit their own calendar in place of this sample template



Intake Checklist:

□ Obtain Approval to Conduct Membership Intake
□ Submit Notice of Membership Intake Form via BraveConnect
☐ Meet with the Fraternity and Sorority Life Advisor to discuss expectations during the membership intake process. Call 910-775-4307 or email greek@uncp.edu to set up a meeting with your FSL Advisor.
□ Submit New Member Education/Intake Calendar
□ Submit Copy of Informational Flyer
□ Schedule time for FSL Advisor to present at informational meeting
□ Submit Anti-Hazing Policy Compliance Form (pg. 6)
□ Submit Verification of Aspirants Form (pg. 7)
□ Submit New Member Roster Addition Form (pg. 9)
□ Submit New Member Presentation Form (pg. 10)
□ Schedule New Member Presentation preview with Chapter Advisor
For clarification or questions contact your respective FSL Advisor:
Lamar James: NPHC, Hok Nosai Advisor 910-775-4048, <u>lamar.james@uncp.edu</u>
Jade Jones: DGC Advisor 910-775-4668, jade.jones@uncp.edu