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 Spring 2021 of Intake

<table>
<thead>
<tr>
<th>Event</th>
<th>Dates</th>
</tr>
</thead>
<tbody>
<tr>
<td>Intake Window Opens:</td>
<td>Wednesday, August 18, 2021</td>
</tr>
<tr>
<td>Notice of Membership Intake Form due:</td>
<td>Friday, September 17, 2021 at 4:00pm</td>
</tr>
<tr>
<td>Fall Break (No Intake Activities):</td>
<td>Thursday, October 14 – Friday, October 16, 2021</td>
</tr>
<tr>
<td>Intake Window Closes:</td>
<td>Sunday, November 14, 2021</td>
</tr>
<tr>
<td>Thanksgiving Break:</td>
<td>Thursday, November 25 – Friday, November 27, 2021</td>
</tr>
<tr>
<td>Final Exams:</td>
<td>Monday, December 6 – Friday, December 10, 2021</td>
</tr>
</tbody>
</table>
Please return completed forms to:
Fraternity and Sorority Life Office
James B. Chavis University Center Suite 225
910.775.4307 | greek@uncp.edu |

TABLE OF CONTENTS

- Expectations For Chapters Conducting Intake Page 3
- Process for Organizations Conducting Intake Page 4
- Presentation of New Members Page 5
- Notice of Membership Intake Form Page 6
- Anti-Hazing Policy Compliance Form Page 7
- Verification of Aspirants Form Page 8,9
- New Member Roster Addition Form Page 10
- New Member Presentation Form Page 11
- Example New Member Education Calendar Page 12
- Checklist for Chapters Conducting Intake Page 13
**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. All Intake Activities (Informational Meetings, Education Session, New Member Presentations, etc.) need to be submitted via BraveConnect for approval.
   a. Education Sessions can set at as “Invited users Only” so that the Education Session will not show as an event on BraveConnect.
3. The membership activities will not interfere with academic endeavors or class schedules.
4. The selection of new members will be free of any form of mental and/or physical abuse and hazing.
5. Chapters will not engage in pre or post hazing activities.
6. Chapter advisor(s) will be present at all membership related activities.
7. Chapters will complete all required paperwork in a timely fashion.
8. No membership activity includes the presence or consumption of alcohol.
9. Prospective members will be made aware of the University of North Carolina at Pembroke Hazing Policy.
10. All membership intake activities are to be conducted in compliance with each inter/national Organization’s intake guidelines and process.

   *This includes UNC Pembroke COVID-19 restrictions until further notice given by the Fraternity and Sorority Life Office.

11. 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 a Fraternity and Sorority Life Advisor.
Process for Organizations Conducting Membership Intake

1. Chapters can only begin the membership intake process with approval from the Fraternity and Sorority Life office and their sponsoring Alumni/ae Chapter and/or Regional/National officer.

2. Chapters must submit a Notice of Membership Intake Form by **Friday, September 17, 2021 at 4:00pm** if your chapter plans to conduct membership intake for the **Fall 2021 Semester**.

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.**
Presentation of New Members

All organizations must adhere to the following guidelines when presenting new members to the campus community:

1. Presentation of new members must take place prior to the close of intake window
2. No explicit or revealing attire is to be worn by the new members or other “show” participants
3. No sexually explicit content, behavior, or excessive use of profanity
4. No alcoholic beverages will be permitted. This includes by visiting chapters, alumni and/or graduate members.
5. No physical abuse will be tolerated. This includes but is not limited to: slapping, kicking, spitting, punching, pushing, poking, caning, etc. (Canes, staffs, sticks, chains, etc. may be used as a part of the performance but may not be used as a weapon to harm another individual)
6. In the event of a fight during the presentation, then those fighting will be disciplined immediately. If a member of the presenting organization is involved, the presentation show will be stopped immediately. (See Violations section for further details)
7. No references to hazing and/or other illegal activities
8. Disruptions by other attending organizations will not be tolerated. This includes but is not limited to: walking through the presenters’ show, talking over the presenting organization, etc.
9. If a new member decides that they cannot, or decides not to participate in the show, a written and signed letter by the new member must be submitted to the Office of Fraternity and Sorority Life no more than 72 hours before the show explaining why they cannot, or have decided not to participate.
10. No blatant skipping of numbers will be allowed. (ex: 1,2,4,5, etc)
11. Fraternity and Sorority Life or his/her designee (full-time, professional or graduate) MUST be in attendance at all New Member Presentations.
12. It is the chapter responsibility to notify visiting and alumni members of all UNC Pembroke New Member Presentation regulations.
13. New Member Presentations may not be scheduled to begin after 7:30pm and must begin within 30 minutes of the advertised start time. Any organization seeking to start past 7:30pm will need approval from the Office of Fraternal Leadership & Learning.
14. New Member Presentations must be approved via BraveConnect to be in compliance with in-person gatherings. New Members Presentations can be presented virtually (i.e., WebEx, Zoom, Social Media, etc.) while under UNC Pembroke COVID-19 restrictions*.

* UNC Pembroke COVID-19 restrictions will be enforced until further notice given by the Fraternity and Sorority Life Office.
Notice of Membership Intake

The _______________________chapter of _____________________________ will be conducting membership intake.

In the Fall or Spring (circle one) semester of (year):

______________________________

Date of Interest meeting(s) (mm/dd/yyyy):

______________________________

New Member Education/Intake Period Start Date:

______________________________

New Member Education/Intake Period End Date:

______________________________

New Member Initiation Date:

______________________________

New Member Presentation Date:

______________________________

The above information is correct and accurate to the best of our knowledge. We understand that the Fraternity and Sorority Life Advisor must approve any changes to this document.

Chapter President: ___________________________________________________________

Email: _______________________________ Phone Number: ________________________

Signature:

Chapter New Member Educator: ________________________________

Email: _______________________________ Phone Number: _______________________

Signature:

Chapter Advisor: ___________________________________________________________

Sponsoring Graduate Chapter: _________________________________________________

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.
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:

**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.

<table>
<thead>
<tr>
<th>Fraternity or Sorority:</th>
<th>__________________________</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chapter President (signature, date):</td>
<td>__________________________</td>
</tr>
<tr>
<td>Membership Intake Officer (signature, date):</td>
<td>__________________________</td>
</tr>
</tbody>
</table>
Verification of Aspirants Form

Fraternity/Sorority___________________________________________________

We hereby declare that on ____________ (date of mtg.), the following individuals participated in an interest meeting and are considering the process of membership selection. If selected, these aspirants will be duly initiated into the organization pending the decision of the regional/national/ representatives.

<table>
<thead>
<tr>
<th>Signature-Chapter President</th>
<th>Signature-Chapter Advisor</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Please Print Aspirant’s Name</th>
<th>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 waiver will be in effect until I notify the Fraternity/Sorority Life Office that no longer wish to allow such information to be released.</th>
<th>Banner ID</th>
<th>Hours Completed</th>
<th>Cumulative GPA</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td>840</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td></td>
<td>840</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td></td>
<td>840</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td></td>
<td>840</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td></td>
<td>840</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td></td>
<td>840</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td></td>
<td>840</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td></td>
<td>840</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td></td>
<td>840</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10</td>
<td></td>
<td>840</td>
<td></td>
<td></td>
</tr>
<tr>
<td>11</td>
<td></td>
<td>840</td>
<td></td>
<td></td>
</tr>
<tr>
<td>12</td>
<td></td>
<td>840</td>
<td></td>
<td></td>
</tr>
<tr>
<td>13</td>
<td></td>
<td>840</td>
<td></td>
<td></td>
</tr>
<tr>
<td>14</td>
<td></td>
<td>840</td>
<td></td>
<td></td>
</tr>
<tr>
<td>15</td>
<td></td>
<td>840</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Banner ID: 840
<table>
<thead>
<tr>
<th>Please Print Aspirant’s Name</th>
<th>Banner ID</th>
</tr>
</thead>
<tbody>
<tr>
<td>16</td>
<td>840</td>
</tr>
<tr>
<td>17</td>
<td>840</td>
</tr>
<tr>
<td>18</td>
<td>840</td>
</tr>
<tr>
<td>19</td>
<td>840</td>
</tr>
<tr>
<td>20</td>
<td>840</td>
</tr>
<tr>
<td>21</td>
<td>840</td>
</tr>
<tr>
<td>22</td>
<td>840</td>
</tr>
<tr>
<td>23</td>
<td>840</td>
</tr>
<tr>
<td>24</td>
<td>840</td>
</tr>
<tr>
<td>25</td>
<td>840</td>
</tr>
<tr>
<td>26</td>
<td>840</td>
</tr>
<tr>
<td>27</td>
<td>840</td>
</tr>
<tr>
<td>28</td>
<td>840</td>
</tr>
<tr>
<td>29</td>
<td>840</td>
</tr>
<tr>
<td>30</td>
<td>840</td>
</tr>
<tr>
<td>31</td>
<td>840</td>
</tr>
<tr>
<td>32</td>
<td>840</td>
</tr>
<tr>
<td>33</td>
<td>840</td>
</tr>
<tr>
<td>34</td>
<td>840</td>
</tr>
<tr>
<td>35</td>
<td>840</td>
</tr>
</tbody>
</table>
NEW MEMBER ROSTER ADDITION FORM
CONSENT TO RELEASE STUDENT RECORDS

NAME: _______________________________ ORGANIZATION: _______________________________

BraveMail: ___________________@bravemail.uncp.edu          PHONE: ______________________________

Student Identification Number: ______________________________

I, ___________________________________________ (please print), do hereby authorize the University of North Carolina at Pembroke to release my academic report (semester and cumulative GPA) to the Fraternity/Sorority President and/or Scholarship Chair, Chapter Advisors, and to the National Headquarters of the organization listed above. I understand that this information will be used in reporting for Fraternity and Sorority Life and in determining my eligibility for scholarship consideration, verification of registration, and minimum chapter grade point requirements, for as long as I am affiliated with the fraternity/sorority system at UNC Pembroke. If I no longer wish to have my records released, I understand that I must make a request, in writing, to Fraternity and Sorority Life. I understand that, upon request, I may obtain a copy of this information for my personal use.

ANTI-HAZING AGREEMENT

I, ___________________________________________ (please print), have been informed of the University’s and my (Inter)National Organization’s policies against hazing. I understand what constitutes hazing and know that these practices are not only harmful but also have no place in Greek-letter organizations. I know that hazing cannot be a part of my education or initiation; and that if I am hazed, my chapter is violating the policies of the University, their (Inter)national organization, and North Carolina State Law. I understand that my participation in hazing activities may result in numerous consequences including but not limited to loss of membership and other privileges, as well as subjecting myself to University and/or legal disciplinary action. I know that if I become aware of any hazing activities, I should notify the proper authorities, including, but not limited to, Campus Engagement and Leadership, Division of Student Affairs, Student Conduct, National Organization Headquarters and/or local police department. To initially report incidents of hazing, please contact the Fraternity and Sorority Life, located in the University Center room 225, by phone 910-775-4307 or email greek@uncp.edu.

By signing this document, I do hereby agree to the terms and statements listed above and understand that at any time, I may retract this document and the release of my student records by contacting the Fraternity and Sorority Life Office.

___________________________________________________________                              ____________________
MEMBER SIGNATURE                                                  DATE

___________________________________________________________                              ___
CHAPTER PRESIDENT SIGNATURE                                      ___________

FOR OFFICE USE ONLY:
ACADEMIC SEMESTER: ____________________    CLASS STANDING:    FR    SO    JR    SR    5-yr

*CUMULATIVE GPA: __________   *PREVIOUS SEMESTER GPA: __________ BANNER ID: ______________
   *If first semester freshman, please list high school GPA.
RECEIVED ON: ___________________________   RECEIVED BY: ________________________________

ACKNOWLEDGEMENT: ______ (DIRECTOR)   RECORDED ON ROSTER: _______
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.

<table>
<thead>
<tr>
<th>Location</th>
<th>Date</th>
<th>Time: From - To</th>
</tr>
</thead>
<tbody>
<tr>
<td>Primary Location: The Water Feature</td>
<td>10/15/19</td>
<td>7:12pm- 9:12pm</td>
</tr>
<tr>
<td>Rain Location</td>
<td></td>
<td></td>
</tr>
<tr>
<td>UC Annex</td>
<td>10/15/19</td>
<td>7:12pm- 9:12pm</td>
</tr>
<tr>
<td>Date</td>
<td>Function</td>
<td>Location</td>
</tr>
<tr>
<td>--------------</td>
<td>---------------------------------</td>
<td>----------------</td>
</tr>
<tr>
<td>10/15/2019</td>
<td>Education Session 1</td>
<td>UC Annex</td>
</tr>
<tr>
<td>10/18/2019</td>
<td>Ritual #2</td>
<td>Pine Cottage</td>
</tr>
<tr>
<td>10/20/2019</td>
<td>Presentation practice</td>
<td>UC Annex</td>
</tr>
<tr>
<td>11/07/2019</td>
<td>New Member Initiation</td>
<td>Aux Gym</td>
</tr>
<tr>
<td>11/11/2019</td>
<td>New Member Presentation</td>
<td>Main Gym</td>
</tr>
</tbody>
</table>

*Chapter may submit their own calendar in place of this sample template*
Intake Checklist:

□ Obtain Approval to Conduct Membership Intake from FSL

□ Submit Notice of Membership Intake Form

□ 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 on off-Campus Chapter Advisor

For clarification or questions contact your respective FSL Advisor:

Abdul Ghaffar, Director of Campus Engagement and Leadership
910-775-4668, jade.jones@uncp.edu

Robin Johnson, Administrative Assistant of Fraternity and Sorority Life
910-775-4307, robin.johnson@uncp.edu