

## Membership Intake Intent Form

**Must be TYPED – Due 14 days before the start of the Membership Intake Process.** Organizations not conducting Membership Intake will complete/submit form prior to September 18th. Failure to submit this form may result in denial of intake procedures. It is recommended that this form is submitted prior to an Informational being conducted.

<b>Organization:</b>	
<b>Chapter Designation:</b>	

### Section 1. Intent

#### A. Positive Intent

This notice is to inform Sorority & Fraternity Life that the organization above: **will** ☐ be conducting membership intake during the Fall ☐ / Spring ☐ (check one) semester of \_\_\_\_\_ (year).

Please Complete Page 2, Section 3

#### B. Abstention

This notice is to inform Sorority & Fraternity Life that the organization above: **will not** ☐ be conducting membership intake during the Fall ☐ / Spring ☐ (check one) semester of \_\_\_\_\_ (year).

#### C. Abstention with intent to conduct an informal meeting

This notice is to inform Sorority & Fraternity Life that the organization above: **will not** ☐ be conducting membership intake during the Fall ☐ / Spring ☐ (check one) semester of \_\_\_\_\_ (year).

However, do plan to host an informational meeting for interested individuals. This meeting will take place on \_\_\_\_\_ (date) at \_\_\_\_\_ (time) in \_\_\_\_\_ (location). The purpose of this meeting is to provide information to interested students about the organization, how to join, and the membership criteria. We understand we are not to engage in any pre-pledging/membership activities that are not part of the (inter) national intake process.

Chapter President Name	Signature	Date
Membership Intake Coordinator Name	Signature	Date
Chapter Advisor Name	Signature	Date

**(Membership Intake Intent Form Continued)**

**Section 2. Membership Intake Information (to be completed if Membership Intake will be conducted)**

**A. Chapter Contacts**

<b>Officer</b>	<b>Full Name</b>	<b>Phone</b>	<b>Email</b>
<b>President</b>			
<b>Membership Intake Coordinator</b>			
<b>Chapter Advisor Overseeing Intake</b>			
<b>Regional/(inter) national Representative Overseeing Intake</b>			

**B. Tentative Intake Outline**

<b>Tentative Interest Meeting Date</b>	
<b>Tentative Membership Intake Completion Date</b>	
<b>Tentative Date of New Member Presentation</b>	

**C. Compliance**

We, the undersigned, attest that this information is accurate and correct to the best of our knowledge.

Furthermore, we agree to the following as conditions of Membership Intake:

1. We will submit a copy of Informational or Interest Meeting flyers to Sorority & Fraternity Life at least ten (10) business days prior to the meeting occurring.
2. We will comply with all of the policies and procedures regarding Membership Intake put in place by University of Kansas and our inter/(inter) national organization.
3. We will comply with local and federal laws and University and (inter) national organization rules, standards, and codes during the Membership Intake process.
4. We will inform Sorority & Fraternity Life of any changes to our Membership Intake schedule by the required deadline.

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Chapter President Name	Signature	Date
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Membership Intake Coordinator Name	Signature	Date
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Chapter Advisor Name	Signature	Date
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## Notice of Membership Intake Form

**Must be TYPED – Due at one-on-one meeting with SFL Staff.** This form will not be accepted unless it is accompanied by a signed copy of: KU Sorority & Fraternity Life Anti-Hazing Agreement, the Membership Intake Coordinator Agreement, and an outline of the Membership Intake Process.

<b>Organization:</b>	
<b>Semester:</b>	Fall <input type="checkbox"/> Spring <input type="checkbox"/>
<b>Year:</b>	

### A. Timeline

<u>Action</u>	<u>Date / Selection</u>
<input type="checkbox"/> <b>Informational Meeting(s)</b> will be held on the following dates, times, and locations	
<input type="checkbox"/> Applications will be distributed on	
<input type="checkbox"/> Applications will be due	
<input type="checkbox"/> If applicable, <b>Interviews</b> will be held on the followings dates, times, and locations	
<input type="checkbox"/> <b>Selection</b> of aspirants will conclude on the following date	
<input type="checkbox"/> <b>Education</b> of aspirants will begin on the following date	
<input type="checkbox"/> The education process has been developed by (check one):	<input type="checkbox"/> the (inter) national organization <input type="checkbox"/> local chapter <input type="checkbox"/> combination of (inter) national and local process
<input type="checkbox"/> Aspirants will be <b>initiated</b> on the following date:	
<input type="checkbox"/> The location of initiation will be (check one):	<input type="checkbox"/> On campus <input type="checkbox"/> Off campus
<input type="checkbox"/> The location of initiation will be where?	

<input type="checkbox"/> The membership education process will last ____ weeks (total number of weeks)	
<input type="checkbox"/> Aspirants will be <b>presented</b> on the following date:	
<input type="checkbox"/> The presentation will be (check one):	<input type="checkbox"/> New Member Presentation  <input type="checkbox"/> Other:

### B. Membership Intake Personnel

The person in charge of Membership Intake for the chapter will be:

<b>Full Name:</b>	
<b>Email:</b>	
<b>Phone Number:</b>	

The Advisor supervising Membership Intake for the chapter will be:

<b>Full Name:</b>	
<b>Sponsoring Graduate Chapter (NPHC only):</b>	
<b>Email:</b>	
<b>Phone Number:</b>	

### C. Membership Intake Process Outline – must be typed and attached to this form

This outline must include date, times, who will be in attendance (including advisors or alumni/ae), who is planning this activity, and a short description of all activities and events. It should also include how aspirants were notified of the activities and a description of the big brother/sister program if one exists for the chapter. Without this outline, this form will not be considered complete.

The above and attached information is accurate and correct to the best of my knowledge.

Chapter President Name	Signature	Date
Membership Intake Coordinator Name	Signature	Date
Advisor Supervising Intake Name	Signature	Date

## Membership Intake Coordinator Agreement

**Must be TYPED – Due at one-on-one meeting with Sorority & Fraternity Life Staff Advisor**

<b>Organization:</b>	
<b>Semester/ Year:</b>	Fall <input type="checkbox"/> Spring <input type="checkbox"/> Year:
<b>Membership Intake Coordinator Full Name:</b>	

_____ (Initials)	I shall submit copy of the eligibility letter from my (inter) national or regional representative providing the organization with approval for intake.
_____ (Initials)	I certify that I have read in full <b>ALL</b> of University of Kansas membership intake procedures, pertinent university policies, and other relevant information from my (inter) national organization regarding Membership Intake.
_____ (Initials)	I will educate my chapter and the aspirants on all of the regulations of membership intake and will keep the Sorority & Fraternity Life (SFL) informed on all membership intake activities conducted by chapter.
_____ (Initials)	I agree to provide the names of the aspirants to SFL within <b>5 business days</b> prior the start of the membership intake education process beginning.
_____ (Initials)	I understand that if the Membership Intake forms are not fully completed and signed by all parties by the outlined deadlines, intake of aspirants will NOT be allowed.
_____ (Initials)	I declare that I will thoroughly review all information submitted to SFL, will only allow information that is true to be turned in and hereby give permission to SFL to verify the validity of all information submitted.
_____ (Initials)	I understand that if any of the information submitted to SFL is found to be false or misleading, SFL reserves the right to suspend the membership intake process pending a full investigation of all statements.
_____ (Initials)	I understand that SFL in coordination with the (inter) national organization, reserves the right to deny the membership intake processes if evidence is present that indicates the chapter is unfit for initiating aspirants.
_____ (Initials)	I have read and signed University of Kansas Non-Academic Misconduct and SFL Anti-Hazing Policy and agree to abide by the statements. I will also make sure that all members (including alumni/ae) understand and follow these guidelines. I further understand that SFL reserves the right to suspend the membership intake process if the organization is found or suspected of being in violation of this policy.
_____ (Initials)	I understand that all membership intake activities will coincide with the policies set forth by my (inter) national organization. Any deviation from the policies of my (inter) national organization must be supported in writing by the Chapter Graduate Advisor, the Regional Director and/or my (inter) national headquarters.

Membership Intake Coordinator Name	Signature	Date
Asst. Membership Intake Coordinator Name	Signature	Date
Asst. Membership Intake Coordinator Name	Signature	Date

## KU Non-Academic Misconduct and SFL Anti-Hazing Policy

Due at one-on-one meeting with Sorority & Fraternity Life Staff Advisor

### A. Compliance Statement

We certify that all activities sponsored or required by our fraternity/sorority members or aspirants comply with the Kansas statute, University of Kansas Non-Academic Misconduct and SFL Anti-Hazing Policy as well our (inter) national organization's hazing policies.

We have informed the aspiring members of our fraternity/sorority of the contents of University of Kansas Non-Academic Misconduct and SFL Anti-Hazing Policy as defined under the Code of Student Rights and Responsibilities, listed below and on [sfl.ku.edu](http://sfl.ku.edu). We acknowledge the following policy statements and will provide/read it to all aspirants at the beginning of each semester of the chapter's membership intake process.

**KU Non-Academic Misconduct Statement:** Students are expected to show positive regard for each other and for the community. Behavior that violates the core value of respect includes, but is not limited to: Hazing: engaging in hazing of another person for the purpose of initiation or admission into, affiliation with, or continuation of membership in any organization operating under the sanction of the University. Hazing includes, but is not limited to, any action, activity or situation which recklessly, negligently or intentionally endangers the mental or physical health, welfare or safety of a person, creates excessive fatigue, sleep deprivation, mental or physical discomfort, exposes a person to extreme embarrassment or ridicule, involves personal servitude, destroys or removes public or private property, or implicitly or explicitly interferes with the academic requirements or responsibilities of a student. It is presumed that hazing is a forced activity regardless of the apparent willingness of an individual to participate in the activity. Apathy or acquiescence in the presence of hazing is not neutral; both are violations of this rule.

**SFL Anti-Hazing Policy Statement:** Hazing will not be tolerated in the University of Kansas sorority and fraternity community. No student or organization has the right to inflict physical or mental harm on a person or to demean, disgrace, or degrade a person. Hazing is prohibited and defined by State of Kansas, in addition to the University of Kansas' Code of Conduct. All forms of hazing by any university student, student organization members (including alumni/ae), or employee, are expressly prohibited and serious penalties, such as separation from the University or loss of recognition by University of Kansas, may be imposed on individuals or groups found in violation of these rules.

We understand that failure to uphold the University's Non-Academic Misconduct and SFL Anti-Hazing Policy may result in organizational and/or individual charges.

We understand that participation in any hazing activity or knowledge of it and taking no action to stop the hazing is in effect giving our approval to haze. We understand our responsibility to not allow members of our organization, whether graduate/alumni status or affiliated at another institution of higher education, to haze our aspirants. Failure to report any such activity of which we become aware of may result in individual charges.

## B. Expectations

1. The academic mission of the institution will be upheld and promoted to aspirants.
2. Membership intake activities will not interfere with academic endeavors or class schedules, will not occur between the hours of 12 a.m. and 8 a.m., and will not include the presence or consumption of alcohol.
3. The selection of aspirants will be free of any form of mental and/or physical abuse and hazing.
4. Members will be selected on the criteria set forth by the (inter) national organization.
5. Organizations will not engage in pre or post hazing activities. Hazing is not tolerated in any form—as part of the new member program or as acts of individual members of the chapter.
6. Organizations will be in good standing with their (inter) national organization, their respective collective, Sorority & Fraternity Life, and University of Kansas.
7. Organizations will complete all required paperwork thoroughly, in a timely fashion, and will not willingly omit any information.
8. Aspirants will be thoroughly educated on University of Kansas Hazing Policy by the chapter.
9. Organizations are not to engage in any membership intake activities outside of the parameters outlined by their (inter) national headquarters/organizations.
10. All membership intake activities must be completed one week prior to the University's designated finals week.
11. The position of SFL concerning a chapter's membership intake process is that it will be a positive, educational experience for all involved. Names such as "Hell Week" should not be associated with/used at any point during the membership intake process.
12. The practice of surprising aspirants with the date/and or time of initiation is not acceptable. All initiation activities and new member presentations must conclude prior to Stop Day (the last Friday before finals of every fall and spring semester).
13. Aspirants should never be subject to sleep deprivation, servitude and/or moral degradation or humiliation.
14. Aspirants should never be forced to stay or live anywhere against their will.

Our signatures below certify that we have read, understand, and agree to abide by University of Kansas Non-Academic Misconduct Statement and Anti-Hazing Policy. We understand that the Office of Student Conduct & Community Standards, the (inter) national headquarters, and the chapter graduate advisors(s) will be notified of cases of alleged and/or confirmed violations of the Anti-Hazing Policy.

Chapter President Name	Signature	Date
Membership Intake Coordinator Name	Signature	Date
Advisor Supervising Intake Name	Signature	Date

**Membership Intake Outstanding Paperwork Due Dates**  
**Must be TYPED**

<b>Organization:</b>	
<b>Semester:</b>	Fall <input type="checkbox"/> / Spring <input type="checkbox"/>
<b>Year:</b>	

Action	Due	Actual Deadline Date
<input type="checkbox"/> Submit <b>Informational Meeting Attendance Sheet</b>	<b>5 business days</b> following Informational Meeting(s)	
<input type="checkbox"/> Submit copy of Approval / Eligibility letter from (inter) national or Regional representative	<b>5 business days</b> prior to Membership Intake educational process beginning	
<input type="checkbox"/> Resubmission of the <b>Notice of Membership Intake Form</b> if changes were needed post approval from (inter) national or Regional representative	<b>5 business days</b> prior to Membership Intake educational process beginning	
<input type="checkbox"/> Submit <b>Verification of Aspirants Form</b>	<b>5 business days</b> prior the start of the Membership Intake education process beginning	
<input type="checkbox"/> New Member Presentation Agreement	<b>15 business days</b> prior to the date of the show (must include a copy of confirmation from Office of Event Management & Protocol)	

Our signatures below certify that we understand and agree to abide by the above deadlines set. We understand that Sorority & Fraternity Life reserves the right to suspend the membership intake process and/or cancel any events associated with membership intake if these deadlines are not adhered to.

Chapter President Name	Signature	Date
Membership Intake Coordinator Name	Signature	Date
Advisor Supervising Intake Name	Signature	Date



**Must be TYPED – Due 5 business days following the Informational Meeting  
(attach an additional sheet if more space is needed)**

<b>Organization:</b>			
<b>Semester:</b>	Fall <input type="checkbox"/>	Spring <input type="checkbox"/>	
<b>Year:</b>			
<b>Meeting Date/Time:</b>	Date	Time	AM <input type="checkbox"/> PM <input type="checkbox"/>
<b>Meeting Location:</b>			

[illegible]

I hereby certify that no names were left off of this attendance sheet and that this Informational Meeting was held in compliance with our (inter) national organization's procedures and guidelines.

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Membership Intake Coordinator Name

Signature

Date \_\_\_\_\_

Advisor Supervising Intake Name

Signature

Date \_\_\_\_\_



## Verification of Aspirants Form

**Must be TYPED – Due 5 business days prior to the beginning of the Membership Intake process  
(additional sheets may be attached if necessary)**

<b>Organization:</b>	
<b>Semester:</b>	Fall <input type="checkbox"/> Spring <input type="checkbox"/>
<b>Year:</b>	
<b>Total Number of Aspirants:</b>	
<b>Date of Initiation Ceremony:</b>	
<b>Minimum Cumulative GPA / Credit Hour Requirement:</b>	Cumulative GPA   Credit Hours

By signing below, I attest that the Kansas statute on hazing, the University of Kansas Non-Academic Misconduct and SFL Anti-Hazing Policy has been reviewed and explained to all aspirants. I understand that I am not to engage in any activities that violate these policies or law and that all illegal actions must be reported to the Office of Student Affairs, Student Conduct & Community Standards [studentconduct.ku.edu](http://studentconduct.ku.edu) or law enforcement.

I also understand that my signature shall serve as a request that a preliminary academic eligibility check for all listed aspirants be completed by SFL. Confirmation of aspirants having met the minimum academic requirements listed above shall then be provided to the chapter president and advisor.

Full Name	KU Email	KU ID

### Declaration

We hereby declare that the individuals listed above and on the attached page (for list greater than six) are aspirants for membership into our organization and will be duly initiated per the approval of our regional and/or inter/national representative(s).

Chapter President Name	Signature	Date
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Membership Intake Coordinator Name	Signature	Date
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Advisor Supervising Intake Name	Signature	Date
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## Verification of Aspirants Continued

<b>Organization:</b>	
<b>Semester:</b>	Fall <input type="checkbox"/> Spring <input type="checkbox"/>
<b>Year:</b>	

[illegible]

## New Member Presentation Agreement

**Must be TYPED – Due 15 business days prior to New Member Presentation**

<b>Organization:</b>	
<b>Semester:</b>	Fall <input type="checkbox"/> / Spring <input type="checkbox"/>
<b>Year:</b>	

### A. Guidelines/Expectations

1. All shows must be held no more than 14 business days after the members have been initiated into the organization and prior to Stop Day (the last Friday before finals of every fall and spring semester).
2. Shows are not to be scheduled on the same night/time of a previously planned show of another chapter in NPHC, MGC or an All-Greek meeting/event planned by Sorority & Fraternity Life.
3. No explicit or revealing attire is to be worn by the aspirants or other show participants.
4. No alcoholic beverages are to be consumed prior to or during the New Member Presentation.
5. References to hazing and/or other illegal activities will be not allowed.
6. No physical abuse will be tolerated. This includes, but is not limited to: slapping, kicking, punching, pushing, poking, caning, etc. (canes, staffs, sticks etc. may be used as part of the performance but may not be used as a weapon to threaten or harm another individual).
7. Props and/or spectacle to be used during the show must be approved. Any outright symbols of “pledging” (such as but not limited to paddles, bricks, and rocks) will not be allowed.
8. No profane language (in any language)/gestures in chants, music or speech will be used before, during, or after the show. No members of the organization may dance provocatively with any members of the audience.
9. Chants/sayings/songs will not allude negatively to any other Greek organization, individual, or student group.
10. There are to be no references to any individual(s) departing from the membership intake process.
11. 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, derogatory speech or comments and death marches.
12. The duration of the show will be no longer than 2 hours. Show must begin no later than 15 minutes of the time advertised. Shows must be over and room/location vacated by 11pm.
13. Organizations are limited to one new member presentation.
14. In the event of a fight or other altercation during the show, individuals involved will be removed immediately. If a member of the presenting organization is involved, the show will be stopped immediately and the show will not be rescheduled.
15. The presenting organization will be responsible for ensuring the site is left in its original state after use.
16. Organizations must have Event Management and Protocol confirmation at least 14 business days previous to the scheduled Show.
17. The New Member Presentation Agreement must be submitted to Sorority & Fraternity Life accompanied Event Management and Protocol space confirmation no later than 15 business days prior to the date of the show.
18. A Sorority & Fraternity Life staff member will be in attendance at all shows.

20. Shows must occur in the same semester as the new member education. There can be no delay in the presentation or show.
21. All actions of organization members/aspirants must adhere to the Student Code of Conduct.
22. Violation of these guidelines will result in a referral to the Assistant Director of Sorority & Fraternity Life and may result in punitive sanctions.

New Member Presentation Information	
Date of Show	
Time of Show	<b>Advertised time of start:</b> <b>Actual start time:</b> <b>End time:</b>
Location	
<b>Description of Show (including but not limited to):</b> <ul style="list-style-type: none"> <li>• Complete Outline of Show</li> <li>• Music being used</li> <li>• Skits being conducted</li> </ul>	
Materials/props that will be used during the show:	

**NOTE: Sorority & Fraternity Life staff will keep the details of this show confidential and will use the information for planning purposes only.**

I hereby certify that the information provided on this form is accurate and true and that I have read, understand, and agree to the New Member Presentation Guidelines/Expectations.

Organization Representative Name	Signature	Date
Chapter Graduate Advisor Name	Signature	Date