

Fraternity and Sorority Hazing Compliance Form

We certify that all activities sponsored or required by our fraternity/sorority of members or aspirants/prospective new members comply with the Valdosta State University Hazing Policy, and with the State of Georgia Law.

We have informed the aspirant members of our fraternity/sorority of the contents of VSU Hazing Policy. This policy will be read to aspirants at the beginning of each semester's intake process.

As stated in Valdosta State University's Student Code of Conduct, hazing is "Activities considered to be hazing include two elements: (1) coercion, either overt or covert, and (2) production of physical or mental discomfort, in either the participant(s) or spectators. Such activities suggested or ordered by a group or a member of a group to new or trial members will be considered to carry with them covert coercion even if the activity is defined as "voluntary". Paddling in any form, physical and psychological shocks and creation of excessive fatigue are always considered hazing. Other activities which very often carry with them elements of hazing are: quests, treasure hunts, scavenger hunts, road trips, or any other such activities; wearing apparel in public which is conspicuous and not normally in good taste; engaging in public stunts and buffoonery; morally degrading or humiliating games and activities; late work sessions which interfere with scholastic activities; and any other activities which are not consistent with the regulations of the community. This is not to be considered an all-inclusive list.

We understand that failure to uphold the university's Hazing Policy as stated in Valdosta State University's Student Code of Conduct will result in referral to the Office of organizational violation of the university's Hazing Policy (the fraternity/sorority will face charges), and/or referral to the Office of Judicial Services for an individual violation of the university's Hazing Policy (individuals within the fraternity/sorority who haze will face 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 you become aware may cause personal referral to the Office of Judicial Services.

Our signatures below certify that we have read, understand, and agree to abide by Valdosta State University's Hazing Policy.

Fraternity/Sorority Name

Name of Chapter

Signature of the President

Signature of the Intake Chairperson

Date

Date

NON-HAZING DOCUMENT

I, _____ (Please Print Name), a student at Valdosta State University, hereby acknowledge that I am knowledgeable of the policy of the University prohibiting hazing and/or pre-initiation activities as they are set forth in the University's Code of Student Conduct and the State of Georgia Hazing Law.

Georgia State Law "**Hazing**" "Haze" means to subject a **student** to an activity which endangers or is likely to endanger the physical health of a **student**, regardless of a **student's** willingness to participate in such activity.

(2) "School" means any school, college, or university in this state.

(3) "School **organization**" means any club, society, fraternity, sorority, or a group living together which has **students** as its principal members.

(4) "**Student**" means any person enrolled in a school in this state.

(b) It shall be unlawful for any person to haze any **student** in connection with or as a condition or precondition of gaining acceptance, membership, office, or other status in a school **organization**.

(c) Any person who violates this Code section shall be guilty of a misdemeanor of a high and aggravated nature.

I am aware that there shall be no physical, mental, or verbal abuse, scare tactics, horseplay, practical jokes, or tricks, or any humiliating, or demeaning acts which might negatively affect myself or any other prospective member prior to, during, or after the new membership intake process to become a member of any National Pan-Hellenic Council at the VSU affiliate organization.

If hazing occurs, I will immediately contact the organization's chapter advisor and the Office of Greek Life. I will also follow-up with a written statement in regards to the allegation. I am aware of the University's disciplinary policies and Georgia's hazing state law regarding its ramifications as a criminal offense. The University reserves the right to discipline students for acts of misconduct such as hazing wherever they may occur.

I understand that the Office of Judicial Services, University Police, as well as the National Headquarters and the chapter advisor (s) will be notified of cases of alleged and confirmed violations of the Hazing Policy

Chapter Members Signature: _____ Date: _____

**Potential New Member Academic Release & Anti-Hazing Form
Valdosta State University – Office of Greek Life**

INSTRUCTIONS: Please PRINT all information. This form must be filled out by ALL Associate/Potential New Members and submitted to the Office of Greek Life.

Student Name: _____ ID number _____

Chapter: _____ Semester: _____

***** IMPORTANT – PLEASE READ *****

Academic Release Authorization

University policy prohibits the release of personally identifiable information from the educational records of students without their prior written authorization. Exceptions to this policy are limited to a) release of such information to a specified list of officials with a legitimate educational interest in the record, b) the release of such information in response to a court order, health or safety emergency, or approved research project, or c) the release of public Directory Information which has not been previously restricted by the student.

I hereby consent to the release of my enrollment status and grade point averages (cumulative and previous semesters) to the chapter president, scholarship chair, new member educator, chapter advisor, and national headquarters staff. The purpose of this disclosure is to verify eligibility for membership, verification of achievement of the chapter's minimum academic standards, awards recognition, and for use in chapter scholarship programming. This authorization shall remain in effect as long as I remain a member of the fraternity/sorority and am enrolled at Valdosta State University, unless I submit written revocation of this authorization to the Office of Greek Life.

I authorize the release of my grades to the Office of Fraternity and Sorority Life, and to my chapter at Valdosta State University.

Signature _____ Date _____

The Office of Greek Life is committed to fostering and maintaining an environment free from all forms of hazing. As such, fraternities and sororities are not permitted to engage in any form of hazing activities.

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Any activity as described in this definition, or included on the **New Member Bill of Rights**, upon which the initiation or admission into, affiliation with, or continued membership in a fraternity or sorority is directly or indirectly conditioned shall be presumed to be a "forced" activity, the willingness of an individual to participate in such activity notwithstanding. Any fraternity or sorority that commits hazing is subject to disciplinary action.

My signature indicates that I hereby consent to abide by the Anti-Hazing Statement above and the New Member Bill of Rights.

Signature _____ Date _____