

Chapter Verification Form

The new member activity program has been outlined, discussed, and approved in writing by the Office of Student Leadership & Activities, at least 24 hours prior to the start of new member activities. I have discussed the program with representatives of our chapter. Furthermore, I have read and shared all of the New Member Packet information with ALL members of my organization as well as the individuals selected as new members. My organization agrees to comply with all new member guidelines, University regulations, and the New York State Law. I understand that Hofstra University does not support any activity, on or off campus, at any point during the recruitment, bid distribution, or induction period that violates any guidelines in the New Member Packet and the Code of Community Standards for Hofstra University Organizations. I understand that our national headquarters and campus advisor must also submit a signed verification form. Lastly, I understand that if our national chapter status changes from this point forward, we must submit a formal written notice to the Office of Student Leadership & Activities at Hofstra University.

As President, Vice-President, and Membership Educator of _____
Organization, we accept any and all responsibility for our Chapter's activities.

PRESIDENT

Name (print)

Signature/Date

VICE PRESIDENT

Name (print)

Signature/Date

NEW MEMBERSHIP EDUCATOR

Name (print)

Signature/Date

ASSISTANT DIRECTOR OF STUDENT LEADERSHIP & ACTIVITIES

Name (print)

Signature/Date