Florida State University
Fraternity and Sorority Hazing Policy Compliance Form

We certify that all activities sponsored or required by our fraternity/sorority members or aspirants/prospective new members comply with The Florida State University Hazing Policy and the Chad Meredith Act.

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

Hazing will not be tolerated in The Florida State University 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 in section 240.262 of the Florida Statutes, in the FSU Student Conduct Code, and in the University Hazing Policy. All forms of hazing by any university student, student organization, or employee, are expressly prohibited and serious penalties, such as separation from the university or loss of recognition by the Florida State University, may be imposed on individuals or groups found in violation of these rules.

We understand that failure to uphold the University’s Hazing Policy as stated in The Florida State University Student Conduct Code 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/prospectives. Failure to report any such activity of which we become aware of may result in individual charges.

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

________________________________  ____________________________________________
Fraternity/Sorority Name                    Name of Chapter

________________________________  ____________________________________________
Signature of the President                Signature of the Intake Chairperson

________________________________  ____________________________________________
Name of the President                     Name of the Intake Chairperson

________________________________  ____________________________________________
Date                                      Date