Student Engagement
SOUTHEASTERN LOUISIANA UNIVERSITY

New Member Roster and Initiation Verification Form

Semester ☐**Fall** ☐**Spring** **Year**: _____

*This form is due **within 3 business days** following the completion of Intake and must be approved by the Office for Student Engagement before any New Member Education process can begin and before Initiation may occur.*

Chapter/Organization: _____ **Submission Date:** _____

By signing this document you agree to the following:

- **Academic Release** - I wish to waive my rights granted to me by the Family Educational Rights and Privacy Act of 1974 and permit Southeastern Louisiana University to release academic information about me to my respective Fraternity/Sorority, my respective organization national/headquarters office, Southeastern Louisiana University awards committee, or any other designated party with a legitimate educational interest. I understand that this waiver will be in effect until I notify the Office for Student Engagement that I no longer wish to allow such information to be released.
- **Housing** - I acknowledge that I will be charged a non-refundable parlor fee if my fraternity/sorority has a house in the Greek Village. The parlor fee will be applied regardless of personal place of residency. I further acknowledge that I am responsible for ensuring my respective organization updates my membership status with the Office for Student Engagement.
- **Enrollment Requirement** - I must be enrolled and continue to be enrolled as a full-time student and meet all minimum grade point average requirements in order to be initiated.

First and Last Name	W#	Signature	Date

Chapter President's Signature: _____ Date: _____
Chapter Advisor's Signature: _____ Date: _____
Coordinator of Fraternity and Sorority Life: _____ Date: _____
Director of Student Engagement: _____ Date: _____