

Verified Aspirants Hazing Compliance Form

Organization: _____

We declare that on _____ (date submitted), the following individuals' information is correct, and signatures are valid.

Michigan State University is committed to providing a safe environment in which all students have the right to belong to student organizations without undergoing hazing as a rite of entry. Hazing is strictly prohibited by the University, as it can result in irrevocable harm to students, their families, and the University community.

No student organization or individual student shall conduct or condone hazing activities. Any group or individual found responsible for hazing may be subject to disciplinary action, criminal prosecution, and/or civil prosecution.

By signing this document, I affirm that I have read and understood Michigan State University's policy on hazing. I agree to abide by this policy and understand that hazing is strictly prohibited. I acknowledge that hazing includes, but is not limited to, actions that cause or risk mental or physical harm, humiliation, or interference with academic pursuits, and that participation or consent does not justify hazing. I further understand the consequences of violating this policy, including potential disciplinary action by the University and legal consequences under state law.

First & Last Name	MSU ID Number	Signature
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12.		

Chapter President Signature

Intake Chair Signature

Chapter Advisor Signature



Fraternity and Sorority Life
Student Affairs
MICHIGAN STATE UNIVERSITY