# ASU Greek Life Reactivation Packet



Office of Student Engagement Division of Student Affairs Office: Student Center East Campus, Student Affairs Suite (Orange Zone)

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# Annual Greek Organization Renewal Application

1.	ORGANIZATION NAME:	
2.	Chapter President: Cell Phone:E-mail:	
3.	Faculty/Staff Advisor Contact Name:         Cell Phone:       E-mail:	
4.	Number of active members:	
5.	Meeting Schedule:	
6.	Submission Type:	
7.	Are there any changes to the Chapter's Constitution or Bylaws?NoYes (If yes, please	
s	ubmit the updated copy with this form)	
8.	Does this chapter charge local chapter dues? Yes No (If yes, how much? and ho	w

often?\_\_\_\_\_)

## APPROVAL (for office use only)

Date received by the Office of Student Engagement
Complete Registration Packet submitted? Yes\_\_\_\_No\_\_\_\_
Application
Advisor's Agreement
Current Copy of Organization's Constitution or Bylaws
Roster
Action: 
Approved 
Not Approved
Reason \_\_\_\_\_\_

# ASU Greek Life Chapter

#### PLEASE READ THE INFORMATION BELOW COMPLETELY BEFORE SIGNING:

The organization listed requests to be registered as a student organization at Albany State University for the upcoming academic year. When approved, recognition is granted through fall & spring semesters providing that the organization remains in good standing with the University.

As officers of the organization, we agree individually and collectively to ensure compliance with the following:

**1.** The stated purposes of the organization are consistent with the educational mission of the University and the organization is non-profit;

**2.** At the time of election or appointment and during the term of office students must have/maintain a cumulative GPA of 2.5 or higher. (Students in their first semester of enrollment at ASU are exempt from this requirement);

**3.** General members must maintain a cumulative GPA of 2.5 or higher (students in their first semester of enrollment at ASU are exempt from this requirement);

**4.** Membership in the organization will not be denied on the basis of race, religion, sex (except as permitted by law), age, physical disability or sexual orientation;

**5.** The rights to vote and hold office are restricted to matriculated, currently registered students of the University;

**6.** The officers have been elected/appointed as outlined in the organization's constitution;

**7.** All activities will be carried out in accordance with the organization's constitution which is on file with the Office of Student Engagement;

**8.** All amendments to the constitution will be submitted to the Office of Student Engagement within five (5) working days of the change;

**9.** The current Chapter officers affirm compliance with the constitution or bylaws of the Regional and National body;

**10.** No member of the organization shall engage in hazing (i.e. commit any act that causes or is likely to cause bodily danger, physical or mental harm or personal degradation to any member of the University community);

**11.** All Chapter Members will abide by all local, state, and federal laws as well as the Albany State University's Student Code of Conduct and University policies.

# **Greek Life Organization Agreement**

We certify that the information we have provided on this form is complete and accurate. We agree to keep all organizational records current and abide by all policies affecting Greek organizations. We also agree to update our forms if changes occur and file such changes with the Office of Student Engagement.

We acknowledge and affirm that the membership practices of this organization are in compliance with the laws associated with hazing (local, state, fed., DOE), discrimination based upon race, color, national origin, sex, religion, gender, sexual orientation, disability, or identity as a disabled veteran.

The term of office for the persons listed below is valid through the academic year unless the Office of Student Engagement is informed in writing of any changes / elections. Signatures indicate assumption of responsibility for compliance with statements above and the conditions of recognition. All officers who have signed below have read and understand those statements including full liability for all actions of the organization.

Each organization must have at least three full-time officers that are not on academic/disciplinary probation.

# Officer Contact Information - <mark>At the time of election or appointment and during the term of office students must have/maintain a cumulative GPA of 2.5 or higher. (Students in their first semester of enrollment at ASU are exempt from this requirement).</mark>

As currently enrolled ASU students, the organizations Chapter Officers shall be:

1. President		Student ID:		
Phone #	_E-mail			
Signature:		Permission to release information: Yes No		
2. Vice President		Student ID:		
Phone #	_E-mail			
Signature:		_Permission to release information: Yes No		
3. Secretary		Student ID:		
Phone #	_E-mail			
Signature:		Permission to release information: YesNo		
4. Treasurer		Student ID:		
Phone #	_E-mail			

Signature:		Permission to release information: Yes	_No
5. Additional Officer		Student ID:	
Phone #	E-mail		
Signature:		Permission to release information: Yes	_No
6. Additional Officer		Student ID:	
Phone #	E-mail		
Signature:		Permission to release information: Yes	No

\*Released directory information for your organization may be placed in school publications via website, email blasts, student handbook, etc.



### \*\*IT IS THE ORGANIZATION'S RESPONSIBILITY TO KEEP ALL INFORMATION UPDATED IN THE OFFICE OF STUDENT ENGAGEMENT

# ASU Greek Life Annual Faculty/ Advisor Agreement

#### Greek Life Chapter Advisor Expectations

Albany State University Office of Greek Life requires that all Greek Life Chapters maintain a University advisor who is a full-time faculty or staff member. Advisors play an important role in helping chapters create an environment within the organization that is safe, educational, productive, and enjoyable.

#### **Responsibilities:**

- Sign and submit an annual Advisor Agreement each academic year;
- Satisfy mandatory meeting and/or training requirements established by the University, the Division of Student Affairs, and the Office of Greek Life;
- Become familiar with University policies and procedures pertinent to Greek organizations. Inform the membership of the policies concerning risk management, liability, and expected behavior;
- Assist the chapter in completing necessary campus forms and maintenance of the organization's record;
- Inform the Office of Student Engagement when there is a change in an advisor's status such as resignation, sabbatical, etc.

#### Role:

- Help the Chapter develop meaningful programs consistent with the organization's purpose and goals;
- Encourage Chapter members to develop initiative, responsibility, and positive group interactions;
- Mediate conflicts within the Chapter and assist with resolving problems as they arise;
- Be aware and knowledgeable of the Chapter's programs, activities, and events;
- Be present at all Chapter functions on or off campus.

#### Liability Statement:

Faculty and staff at Albany State University that advise Greek organizations are expected to adhere to University policies and state and federal laws in all their advising interactions with student organizations. Faculty and staff that are advising Greek organizations voluntarily, as well as those that are advising organizations as a function of their role, are expected to utilize common sense in all their interactions, and to provide advising only within the context of common-place parameters of their employment and their individual skill set and professional expertise.

#### **Replacement:**

Occasionally an advisor to a Greek organization does not meet the expectations of the organization or fails to fulfill the responsibilities of an advisor. If a Chapter feels that their advisor is ineffective, the Chapter President should contact the Office of Student Engagement to discuss the problem(s) or issues involving their advisor.

#### Length of Assignment:

Advisors assume their role for one academic year. Advisor continuity is desirable. However, advisor assignments are renewed each academic year and are subject to the agreement of the advisor, the Chapter, and the Office of Greek Life.

#### **Resignation:**

An advisor should notify the Office of Student Engagment when he/she decides to no longer serve as an advisor. Advisors should notify the Chapter's officers of the resignation and provide reasonable support in the transition of the advisor position.

I have read and understand the roles and responsibilities of accepting the position of Advisor to a Greek Organization. If for any reason, I am unable to fulfill my responsibilities and commitment to the organization listed below, I will immediately contact the Chapter's officers and the Office of Greek Life at 229.500.3531.

Advisor Name:\_\_\_\_\_

AdvisorSignature:

## Albany State University Advisor Statement of Responsibility

Name of Organization:

I hereby agree to be advisor for this Greek organization. I understand that I am responsible for ensuring that the organization operates in accordance with the aforementioned guidelines, the Albany State University Student Code of Conduct, local, state, and federal laws, and with good judgment and ethical decision-making. I understand that as the advisor I am required to attend the mandatory advisor sessions each semester, and that failure to do so will result in revocation of my status as the Chapter advisor and possibly the status of the Chapter that I advise.

#### **Primary Advisor:**

Name of Faculty/Sta	aff Advisor		
Phone #	E-mail		
Faculty/Staff Adviso	nr's Signatura	Date	
Faculty/Stall Auvist		Date	
	se information: YesNo		
*Released informati	on for directory purposes only.		
Please check one:_	I served as this group's advisor last year. I am a new advisor to this group.		
Secondary Advisor	:		
Secondary Advisor I	Print Name		
Phone #	E-mail	_	
Secondary Advisor S	Signature	Date	
Secondary Advisor	Janatur e	Dutt	
Permission to releas	se information: YesNo		

\*Released information for directory purposes only.

## Albany State University Membership Eligibility/Anti-Hazing Policy & Compliance Form

This form must be on file with the Office of Student Engagement on an annual basis to certify compliance with the University's Anti-Hazing policy.

Organization:\_\_\_\_\_Date Submitted: \_\_\_\_\_

#### **Georgia Hazing Law**

#### Georgia - § 16-5-61

As used in this Code section, the term:

(1) "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 ina school **organization**.

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

Misdemeanor of a high and aggravated nature - prohibits any possible activity which endangers the physical health of a student, regardless of a student's willing participation, in connection with initiation.

#### ASU Hazing Policy

No student shall individually or jointly engage in any act of hazing involving another member of the institutional community. Albany State University adheres strictly to the definition of Hazing outlined by Georgia Law. In addition, the University further prohibits any action that subjects a candidate for membership or member of a student organization to activities that are personally demeaning or involve a substantial risk of physical injury. Such acts include both organized rites of initiations and informal activities. Hazing also may include, but is not limited to: any brutality such as: paddling or caning, whipping' forced calisthenics, tattooing, exposure to the elements, forced consumption of any food, liquor, or other substance, dangerous acts, physical constraints, or uncomfortable assignments that could adversely affect the physical health or safety of the individual. Hazing shall also include any activity that would subject a student to mental stress such as sleep deprivation, forced exclusion from social contact, or forced conduct which could result in extreme embarrassment such as public servitude, giving money to individuals, destroying public or private property, and performing unauthorized scavenger hunts. Students involved in hazing activities are subject to institutional disciplinary action in addition to civil and criminal liability.

#### Possible Sanctions for Hazing Offense:

1. By an organization- Probation (Number of semesters; duration to depend on infraction); Restitution + Fine (\$1,000-\$3,000); Loss of privilege to be a campus organization; counseling; Indefinite Suspension; Suspension; Expulsion; and Loss of privileges.

2. By an individual or individuals- Probation (Number of semesters; duration to depend on infraction); Restitution + Fine (\$500- \$1,000); counseling; Indefinite Suspension; Suspension; Expulsion; Incarceration; Loss of privileges, Loss of office/ leadership position; and possible Judicial Record Hold.

#### Anti-Hazing Agreement

We have read and understand Albany State University's Hazing Policy and the State of Georgia's Hazing Law. We will ensure that all activities sponsored or required by our organization are in compliance with this policy. We assume the responsibility of informing all currently active members as well as prospective members of the policies. If we fail to comply with this policy, it may result in a formal investigation of our membership intake process. Furthermore, appropriate actions will be taken as deemed necessary in accordance with the results of the investigation.

#### WE UNDERSTAND AND AGREE TO ADHERE TO THE AFOREMENTIONED STATEMENTS.

Name of Organization:				
Signatures:				
President:	Date:	/	_/	
Primary Advisor:	_Date:	_/	/	

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