

CONSENT TO RELEASE STUDENT RECORDS

Name _____ Fraternity/Sorority _____
Class _____ E-Mail: _____
Fr, So, Jr, Sr, 5th yr

I, _____, do hereby authorize the University of North Carolina at Pembroke to release to my Fraternity/ Sorority President or Scholarship Chair and to my National Headquarters reports determining my eligibility for scholarship consideration, verification of registration, and minimum chapter grade point requirements, for as long as I am affiliated with the fraternity or sorority system. If I no longer wish to have my records released, I understand I must request that in writing to the Greek Life Office.

I understand that, on request, I may obtain a copy of this information for my personal use.

SIGNATURE _____ DATE _____

PERMANENT ADDRESS _____
Street City State Zip

PERMANENT PHONE _____

ALL GREEK COUNCIL BID CARD

Being of _____ University standing with a cumulative GPA of _____ and
Fr, So, Jr, Sr, 5th yr

_____ number of credits, I _____, do hereby officially accept my bid invitation into the _____ chapter of _____ Fraternity at the University of North Carolina at Pembroke in accordance with the All Greek Council Rules and regulations.

CHAPTER PRESIDENT _____ NEW MEMBER _____
DATE _____

ANTI-HAZING AGREEMENT

I hereby agree to neither allow myself to be hazed nor participate in any hazing activities whatsoever; regardless of my status as a new member, active member, and/or alumni/ae.

SIGNATURE _____ DATE _____