



Office of Greek Life Programs
 Department of Student Life
 Hazing Policy Compliance Form

All University of Akron fraternities and sororities must file this form with the Office of Greek Life Programs to certify compliance with this policy. The preceding document remains in effect until a new one is filed.

Ohio Hazing Law

As used in this section, "hazing" means doing any act or coercing another, including the victim, to do any act of initiation into any student or other organization that causes or creates a substantial risk of causing mental or physical harm to any person. No person shall recklessly participate in the hazing of another. The negligence or consent of the plaintiff or any assumption of the risk by the plaintiff is not a defense to an action brought pursuant to this section. No administrator, employee, or faculty member of any primary, secondary, or post-secondary school or of any other educational institution, public or private, shall recklessly permit the hazing of any person.

UA Hazing Policy

Hazing, as defined by the Ohio Revised Code and federal law, is prohibited. It is a violation of this rule for an individual, knowing that hazing has been or is being committed, to knowingly fail to report such information to law enforcement authorities or to student judicial affairs. Officers of a student organization must report any hazing incident(s) of which they are aware. **The consent of the victim is not a defense.**

To report hazing, please contact the University of Akron Police Department 24 hours/day at 330-972-7123 or The Office of Greek Life Programs at 330-972-7909.

Hazing Agreement

We undersigned, certify the following:

1. We have read AND understand The University of Akron's, State of Ohio's, and our National Organization's Hazing Policy
2. We verify that this policy has been read to our chapter
3. We verify that all new members will receive a copy of this policy
4. We verify that all activities sponsored or required by our chapter, in whole or part, comply with this policy
5. Failure of my organization to uphold this policy, in whole or part, will result in the referral of my organization and **any individual members** involved for disciplinary action
6. Furthermore we understand that if a hazing incident should occur, the president and new member educator/intake chairman in addition to any chapter member who takes part in the hazing activities may be referred to Student Judicial Affairs for violating the Student Code of Conduct for hazing and supplying false or misleading information to a University Official (if they knew of the hazing incident and do not take steps to stop it)

Chapter: _____

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| _____ | _____ | _/_/___ |
| Chapter President | Signature | Date |
| _____ | _____ | _/_/___ |
| New Member Educator | Signature | Date |
| _____ | _____ | _/_/___ |
| Chapter Advisor | Signature | Date |

| Name (Print) | Signature | Date |
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PLEASE SUBMIT COMPLETED FORMS TO:
OFFICE OF GREEK LIFE PROGRAMS, STUDENT UNION – CSL, AKRON, OH 44325-4601
PHONE: 330-972-7909 OR FAX: 330-972-2525

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| Office use only | |
| Received date | _____ |
| GL Staff | _____ |