



Membership Intake Intent Form
Sorority and Fraternity Life
The University of Texas at Austin

Sorority and Fraternity Life (SFL) staff must be notified prior to any chapter beginning the Membership Intake Process (MIP). The Membership Intake Process time period begins when the chapter has selected candidates and have begun the education process. The purpose of this form is to notify our office of any chapter MIP activities and to promote compliance with UT Austin’s Institutional Rules on Student Services and Activities and all inter/national organization rules and guidelines regarding the MIP. Any changes to the information below must be updated immediately with your council advisor.

The information provided in this form will be utilized for internal SFL staff use only.

Please return completed forms to:
 Sorority and Fraternity Life
 C/O [your council advisor]
 Student Services Building 4th Floor, Suite 4.400

OR

Email a signed and scanned copy to your respective Council Advisor

Important due dates:

Must submit intent form seven (7) days following the first regular class day of each long semester (unless noted otherwise by SFL staff)

Organization Name: _____

Chapter Designation: _____

- The chapter is not conducting a membership intake process this semester. Should this decision change, the chapter understands that SFL must be notified via email and this form must be resubmitted for approval. The chapter understands that any unsanctioned “pre-pledging” or underground activities that do not adhere to the inter/national organization’s MIP policy will be reported to the Office of Student Conduct and Academic Integrity and the organization’s inter/national headquarters
- The chapter intends to conduct a membership intake process this semester

[please see back side]



The University of Texas at Austin
Sorority and Fraternity Life
Office of the Dean of Students

Complete this section if you intend to conduct a membership intake process this semester

Date(s) of interest meeting(s)/informational(s):

Date(s) of candidate selection:

First date of the education process:

Date of Initiation:

Date of presentation of new members, if applicable:

By signing below, I certify that our chapter is in compliance with your national requirements, has submitted all necessary paperwork, and is in good standing with the national organization to proceed with this semester’s new member process. In addition, the above information is accurate and correct to the best of my knowledge.

Chapter President Name

Chapter President Signature

Date

Membership Intake Chair Name

Membership Intake Chair Signature

Date

Chapter Advisor Name

Chapter Advisor Signature

Date

Council Advisor Name

Council Advisor Signature

Date

Questions regarding this information should be directed to Sorority & Fraternity Life
 (512) 471-9700 or sfl@austin.utexas.edu