

Recruitment Infraction Reporting Form

Name:	
Date:	
Witness(es) Name(s):	_
Accused Organization:	_
Location of Alleged Infraction:	
Date of Alleged Infraction:	
Detailed Account of Infraction:	

Please turn into the Greek Affairs Office – SU Rm 208 within 7 days of the alleged event.

This form does not indicate guilt, only that an investigation into the event will take place. Further punitive action will be decided upon by the investigation body.