INTERFRATERNITY COUNCIL COMPLAINT FORM

To be filled out and submitted to the Interfraternity Council Vice President or Office of Fraternity & Sorority Affairs within one (1) week of the alleged incident.

Against [name of fraternity]:_____

For violating: _____
(List specific rule, bylaw, etc)

Violation reported by (*reports may be filed by only one of the people listed below*)**:**

☐ Chapter president ☐ Interfraternity Council Officer ☐ Fraternity member
☐ Potential new member ☐ Coordinator of Fraternity & Sorority Affairs advisor

Date/time/location of alleged incident: _____

Witness(es) to the incident (include affiliation/Interfraternity Council office and phone numbers)**:**

_____
_____

Description of the incident (use additional sheets if necessary)**:**

_____
_____

Names and affiliation of cited individual(s) and fraternity involved:

_____
_____

Names, addresses and phone numbers of individual(s)/fraternity reporting incident:

_____
_____

Signed by: _____

_____
Name and position Date

To be completed by the Interfraternity Council Vice President or Coordinator of Fraternity & Sorority Affairs

Date submitted: _____

Report properly submitted? ☐ Yes ☐ No If no, briefly explain: _____
_____

Written charges sent to:

☐ Accused fraternity president Date: _____
☐ Coordinator of Fraternity & Sorority Affairs Date: _____
☐ IFC Vice President Date: _____
☐ IFC Chief Justice Date: _____