



THE UNIVERSITY of
NEW ORLEANS

OFFICE OF STUDENT AFFAIRS
ANNUAL STATEMENT OF ACKNOWLEDGEMENT
FOR REGISTERED STUDENT ORGANIZATIONS

ANTI-HAZING POLICY, AP-AA-32.3

To: Office of Student Involvement & Leadership

On behalf of _____, I certify that
(Registered Student Organization Name)

_____, and its officers, members,
(Registered Student Organization Name)

or applicants for membership have received a copy of the University of New Orleans Anti-

Hazing Policy (AP-AA-32.3) via email and that _____
(Registered Student Organization Name)

understands and agrees to comply with the policy and law. I understand that if our organization is a high-risk organization (e.g., sports-related, fraternity or sorority), each member will also need to submit the Anti-Hazing Pledge form.

Organization President

(Signature)

(Printed Name)

(Date)

Faculty or Staff Advisor

(Signature)

(Printed Name)

(Date)

FOR OFFICE USE ONLY

Date Received:

Received by: