



**Membership Termination Form**  
 Student Involvement & Leadership Development  
 Campus Life Building, Room 150  
 815-753-1421

Organization: \_\_\_\_\_ Chapter: \_\_\_\_\_

All members to be removed **MUST BE TYPED** below in their alphabetical order on the roster. A Grade Release/Hazing Policy Acknowledgement Card must be on file for each person who appears on this roster.

This form must be submitted to the FSL Office, Campus Life Building 150, two (2) weeks prior to beginning a membership intake process, or November 15th for the Fall or April 15th for the Spring, whichever occurs first.

Full Name	Z-ID Number	Reason (Student Teaching, grades, etc.)
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		

I understand that if I do not provide all three components for removals (name, Z-ID number, and reason), the individual will not be removed to my organization's roster.

Chapter President: \_\_\_\_\_ Date: \_\_\_\_\_

Chapter Advisor: \_\_\_\_\_ Date: \_\_\_\_\_

FSL Assistant Director: \_\_\_\_\_ Date: \_\_\_\_\_

Department Use Only:

Received By: \_\_\_\_\_ Date: \_\_\_\_\_

Return to:  
 Student Involvement & Leadership Development, Fraternity & Sorority Life  
 Campus Life Building, Suite 150 DeKalb, IL 60115  
 (815) 753-1421