

## COLLEGE PANHELLENIC VIOLATION REPORT FORM

To be filled out and submitted to the College Panhellenic within 30 calendar days of the alleged infraction.

**Panhellenic:** Panhellenic Council of Santa Clara, CA

**Against (name of fraternity):** \_\_\_\_\_

**For violating:** \_\_\_\_\_  
 (list specific rule, Code of Ethics, NPC UNANIMOUS AGREEMENT, etc.)

Violation Reported By (check one):

<input type="checkbox"/> Chapter President	<input type="checkbox"/> Panhellenic VP Recruitment	<input type="checkbox"/> Panhellenic Advisor
<input type="checkbox"/> Recruitment Counselor	<input type="checkbox"/> Potential New Member	

**Date of alleged infraction:** \_\_\_\_\_

**Time of alleged infraction:** \_\_\_\_\_

**Location of alleged infraction:** \_\_\_\_\_

**Witnesses to the incident** (include affiliation/Panhellenic office and phone numbers): \_\_\_\_\_

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

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

**Name of individual/fraternity reporting incident:** \_\_\_\_\_

Address: \_\_\_\_\_

Phone number(s): \_\_\_\_\_

**Signed by:** \_\_\_\_\_  
Name & position Date

<b>To be completed by the College Panhellenic President or Panhellenic Advisor</b>			
Date submitted:			
Form properly submitted?		Yes	No (comment: _____)
Notice of Infraction Form sent to:			
Accused Fraternity	Date:		
Panhellenic Advisor	Date:		
NPC Area Advisor	Date:		