



# PHI SIGMA PI

NATIONAL HONOR FRATERNITY

## Amnesty Program Pledge

I, \_\_\_\_\_, a Collegiate/Alumni/Honorary Member of Phi Sigma Pi, have requested to participate in Phi Sigma Pi's Amnesty Program on account of the poor Hazing and/or Risk Management practices at \_\_\_\_\_ Chapter. I understand that by accepting Amnesty from the National Council, I am committing to work the National Office to reform poor Risk Management practices at my Chapter. I further agree to the following terms of the Amnesty Program:

1. I will immediately cease in performing any activity considered to be hazing or a violation of any Risk Management Policy of Phi Sigma Pi.
2. I will report any instance of hazing or any incident involving a violation of Risk Management that I witness immediately to the National Office.
3. I will cooperate fully (i.e. assist with any situations/investigations that arise from coming forward, as directed by the National Office) with the National Office to provide an accurate, honest and complete portrayal of any and all Risk Management and/or hazing violations at my Chapter to the best of my knowledge. I understand that information I provide may be used as the basis of an investigation and/or as evidence against the Chapter and/or Members of the Chapter in sanction proceedings. I further understand that such evidence may be used against me in sanction proceedings, I should I fail to fulfill the terms of this agreement.
4. I will work with the National Office to the fullest extent of my ability to help reform hazing and/or poor Risk Management practices at my Chapter. I agree to abide by decisions of the National Office regarding any reorganization of my Chapter and/or the implementation of new policies/procedures.

In return the National Office agrees to the following terms:

1. The National Office agrees to withhold enacting sanctions proceedings against the aforementioned Amnesty Program participant, provided the participant meets the terms outlined above.
2. The National Office agrees to act as an arbiter between the aforementioned Amnesty Program participants in cases where the Chapter is seeking discipline against the Amnesty Program participant in retribution for seeking

Amnesty. Chapter motions to discipline Amnesty Program participants solely on the basis of their affiliation with the Amnesty Program will be considered out of order by the National Council.

3. The National Office agrees to work the Amnesty Program participant to the best of our ability to effect positive change at the participant's Chapter to the greatest extent possible, as circumstances dictate.

By signing this pledge, I am affirming my understanding and acceptance of the Amnesty Program as outlined above, and I am committing myself to work fully within the boundaries of the Amnesty Program to reform my Chapter under the guidance of the National Office. I understand that I will be expected to cooperate fully with the National Office in order to receive Amnesty and that if I do not satisfactorily fulfill the terms of my agreement, the National Council may revoke my Amnesty and I may become the subject of investigation and/or Official Sanction Proceedings.

Name (Print): \_\_\_\_\_

Name (Sign): \_\_\_\_\_

Date: \_\_\_\_\_

For National Office Use Only:

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

Staff Member: \_\_\_\_\_