

## Inter-Cooperative Council at the University of Michigan

337 E William Street, Ann Arbor, MI 48104 Office: 734-662-4414 | Fax: 734-662-5870

## **REFERRAL FORM**

**NOTICE**: The following member is being placed on referral, in accordance with Chapter 16 of the ICC Standing Rules.

Member name:	House name:
Date:	
to improve their conduct and a notification	allows a house to both provide an incentive for members on to future houses that this member might be a ess, see the Member's Guide to Referral & Expulsion.
after four weeks of living in the house who be placed on hold (not voided), until you your referral status be reviewed by the	hatever body you were put on referral or by the house hile on referral. If you are on referral, future contracts will are removed from referral. Procedure will dictate that late specified on Referral Form. You may appeal your r in the case of referral by DART—to the ICC
you have not appealed your referral with	g, within one week of being informed of your referral. If hin one week of being informed of it, you should continue 16.5.7 for further details on the appeal process.
You are being put on referral due to the □ Non-Payment Signed by:  (1) House Treasurer	he following: (check all that apply, print & sign names)
Printed name:	
Signature:	(date)
(2) Another house officer	
Printed name:	· · · · · · · · · · · · · · · · · · ·
Signature:	(date)
OR by vote of the house at a hou	use meeting. [Please attach minutes].

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□ Non-Work Signed by: (1) Work Manager	
Printed name:	
Signature:	(date)
(2) Another house officer	
Printed name:	
Signature:	(date)
OR by vote of the house at a house meeting. [Please a	ttach minutes].
□ Generally Uncooperative Behavior Option 1: By a vote of the house at the referral hearing. Option 2: By a petition signed by a simple majority of homeombers, whichever is lower. [Please attach the petition]	ouse members, or 20 house
Signed by: (1) House President	
Printed name:	(date)
(2) Another house officer	
Printed name:	
Signature:	(date)
☐ For actions which jeopardize the interests of the ICC or its not held the interest of the ICC or its not have a signed by: House President or Facilitator	nembers as determined by vote of
Printed name:	_
Signature:	(date)

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☐ As a resul Signe	t of an expulsion hearing d by: House President or Facilitator	
	Printed name:	(date)
Specific gro	unds for referral:	
[If you require	e more room for the grounds attach a separate s	sheet]
Actions requ	uired for removal from referral:	
Form indicate	Il be removed from referral only if the conditions es the same category that is on the Referral For 5.8. (If you require more room for the actions rec	m, or otherwise be in accordance
	copy of this sheet should be given to the accuse one should be kept by the house, and one shou	
FOR OFFICE	USE ONLY:	
Received by:	(initials) (date)	

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