

DEACTIVATION REQUEST FORM

1. A member seeking deactivation or a chapter seeking to deactivate a member must complete a *Deactivation Request Form* and email it to document@sigmaalpha.org. Ideally, this decision should take place following a telephone discussion with your Regional Consultant.
2. Upon receipt of the *Deactivation Request Form*, the Regional Consultant shall review the form for compliance with deactivation requirements as outlined in the Member Status Guidelines and the National Bylaws. If necessary, the Regional Consultant will follow-up via phone or email with the chapter or member before deciding to approve or disapprove the deactivation.
3. The Regional Consultant will decide whether to approve or disapprove the *Deactivation Request Form* and notify the chapter and member by email, and copy the Administrative Assistant.
4. The Administrative Assistant maintains a Deactivation Master List that includes:
 - Member Name,
 - Chapter Name,
 - Date *Deactivation Request Form* was received,
 - Date *Deactivation Request Form* was approved/disapproved,
 - By whom the *Deactivation Request Form* was approved/disapproved
5. The Administrative Assistant updates the Sigma Alpha Sorority's database and website member list based on the Deactivation Master List.
6. The Administrative Assistant retains a copy of the *Deactivation Request Forms* for four (4) years.