



## Request for Establishing a New Organization

Name of Organization \_\_\_\_\_

Type of Organization: ☐ Academic ☐ Honorary ☐ Service ☐ Religious ☐ Special Interest ☐ Sorority ☐ Fraternity

Organization Advisor(s): \_\_\_\_\_

Organization Representative/Alternate: \_\_\_\_\_

Organization President: \_\_\_\_\_

Purpose of Organization: \_\_\_\_\_

\_\_\_\_\_

Scheduled Meetings (Day of the Week/Time/ Location): \_\_\_\_\_

### Proposed Activities:

#### Fall Term:

\_\_\_\_\_

#### Spring Term:

\_\_\_\_\_

Organization Membership (Please print or type, students must be currently enrolled, enrollment will be verified).

- |          |           |
|----------|-----------|
| 1. _____ | 6. _____  |
| 2. _____ | 7. _____  |
| 3. _____ | 8. _____  |
| 4. _____ | 9. _____  |
| 5. _____ | 10. _____ |

### Please attach a written formal constitution that includes the following information:

1. Name of organization and sponsorship
2. Purpose of organization
3. Acknowledgement of adherence to the jurisdiction of College regulations
4. Member qualifications, method of selection and termination of membership (a minimum of ten members is required)
5. Officers, duties of officers, tenure, and method and time of elections
6. Fees and dues
7. Insignia
8. Ceremonies, rituals, and meetings (which must be open)
9. Definition of a quorum
10. Method of selection and duties of the faculty/full-time staff advisor.
11. Standing committees and their purpose
12. Publications

Application Submitted by: \_\_\_\_\_ Date: \_\_\_\_\_

Academic Year Submitted: \_\_\_\_\_

	Recommended	Not Recommended	Date
SGA- Student Life Coordinator	_____	_____	_____
Dean, Student Services	_____	_____	_____
Vice Pres., Educational & Student Services	_____	_____	_____
	Approved	Disapproved	Date
College President	_____	_____	_____