



# Student Organization Application

ORGANIZATION NAME

*Purpose/Description of the organization (50 words or less)*

Type of Organization: Educational \_\_\_ Community Service \_\_\_ Social \_\_\_ Other \_\_\_

Describe: \_\_\_\_\_

Name of Advisor: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Affiliation with other organizations if applicable:

\_\_\_\_\_

Signature of Advisor

Date

Signature of Student Life Director

Date

\_\_\_\_\_  
Dean of Administrative Services signature

Date

**NOTE: After an organization is approved and recognized, it must operate within the bounds or regulations pertaining to student behavior and the Student Life Department.**