

# Student Activities & Athletics

NESTOR HALL ROOM 116

## Clubs and Organizations Registration Guidelines 2009-10

Columbus State Community College is committed to the belief that students have a right to organize and participate in groups whose purpose center around the interests and goals of the individuals involved. Experiences in the areas of interpersonal relationships, decision-making, and leadership related to the operations of the organization can be vital learning tools. The college encourages students to form student organizations in accordance with college policies, procedures, and guidelines established for this purpose.

In an effort to provide timely and consistent communication, effective July 1, 2007 all student organizations will be required to return their executive board and advisor information *before* the start of Autumn Quarter. During the summer, there will be a number of important updates in reference to programming and policies for student organizations for the upcoming year. **While you will be able to renew your registration each quarter it will cause a delay in distribution of funds from the dept of Student Activities and Athletics, your student organization will be considered non active until new information is received. Please return your registration via email to trashid@csc.edu or drop it off in NH 116. The form needs to be returned by July 20, 2009 in order to receive funding in the SU 09, and by October 26, 2009 to receive funding for AU09**

### GENERAL INSTRUCTIONS

**Forms must be typed or printed. Incomplete forms will not be accepted.**

***NAME OF ORGANIZATION*** – Refer to the current list of student organizations in the Student Activities Office to avoid duplicating the name of an existing organization.

***CURRENT OFFICER OR CONTACT STUDENT LIST*** – This information is essential in identifying officers in student organizations. **You must provide up-to-date information regarding changes in officers.** Cooperation in this matter will enable the Student Activities Office to maintain communication with the organization.

***CAMPUS ADVISOR*** – The selection of an advisor is a critical step in the development of the organization. The advisor should possess knowledge and skills useful to the particular group, a willingness to serve, interest and enthusiasm. By accepting this position, the advisor indicates his or her interest in the objectives of the organization and in the activities by which the organization plans to obtain these objectives. **An organization's primary advisor must be an approved full-time or part-time Columbus State Community College employee.**

**STUDENT ACTIVITIES OFFICE**

**2009-2010**

**CLUB/ORGANIZATION REGISTRATION/RENEWAL FORM**

This form is to be completed by all student organizations registering as a new club/organization or renewing an existing registration. Failure to complete this form will result in a delay or disbursement of funds and deactivation of a organization's *active* status. No organization can discriminate on the basis or race, gender, color, religion, ancestry, national origin, age, disability, veteran status, appearance or sexual orientation. All information provided will be subject to confirmation.

**Please Print or Type**

Official Name of Club/Organization \_\_\_\_\_  
\_\_\_\_\_

Give a brief description of your club/organization's purpose and its goals.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

President \_\_\_\_\_ Student I.D.# \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Telephone # \_\_\_\_\_  
Signature \_\_\_\_\_ E-mail \_\_\_\_\_

Vice President \_\_\_\_\_ Student I.D.# \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Telephone # \_\_\_\_\_  
Signature \_\_\_\_\_ E-mail \_\_\_\_\_

Secretary \_\_\_\_\_ Student I.D.# \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Telephone # \_\_\_\_\_  
Signature \_\_\_\_\_ E-mail \_\_\_\_\_

Treasurer \_\_\_\_\_ Student I.D.# \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Telephone # \_\_\_\_\_  
Signature \_\_\_\_\_ E-mail \_\_\_\_\_

Campus Employee Advisor \_\_\_\_\_  
Campus Address \_\_\_\_\_  
Campus Phone # \_\_\_\_\_

Check one please:    \_\_\_\_\_ I have previously served as this group's advisor  
                          \_\_\_\_\_ I am a new advisor to this group for the **2008-09 academic year.**

The Student Activities Office will not release home addresses, telephone numbers or student identification numbers to the campus community or general public.

**Approximate number of active student members** \_\_\_\_\_  
List local, state, and/or national affiliations \_\_\_\_\_  
\_\_\_\_\_

**In what months are your elections held?** \_\_\_\_\_

Each club/organization will be assigned an on-campus account. *No Columbus State student organization may open an outside bank account.*

Please check one of the following:

- \_\_\_\_\_ We are a new club/organization and our constitution is attached.
- \_\_\_\_\_ No changes have been made to our club/organization's constitutions during the most recent academic year.
- \_\_\_\_\_ There have been one or more changes to our organization's constitution and a copy of the revised constitution is attached.

Reviewed and approved: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

\_\_\_\_\_  
**Director, Student Activities and Athletics**