



Registration for Student Organizations

In order to be considered a registered student organization (RSO) for the 2010-2011 academic year, this application must be completed and submitted no later than Wednesday, September 22 at 5:00 p.m. to the Coordinator of Student Activities and Intramurals office in Johnson 116 or mailbox in Johnson 122.

Information that will need to be provided on this application includes:

- Type and Purpose of Organization
- Leadership/Executive Members of the Organization and Contact Information
- Number of Active Members (including names of at least 8 members)
- Faculty/Staff Advisor Information AND signature
- Copy of the Organization's Constitution and Bylaws (**PLEASE ATTACH TO APPLICATION**)

Benefits of being a registered student organization include:

- Leadership Development
- Staff Assistance
- Room Reservations
- Games/Equipment Rentals
- Bulletin Boards
- Signage Materials
- Campus Information Channel
- Funding.
- Mailbox
- Recognition

An unrecognized/unregistered student organization will not have access to these resources and privileges.

Organization Name: _____

Organization Classification (check all that apply):

- | | |
|--|--------------------------------------|
| <input type="checkbox"/> Academic | <input type="checkbox"/> Political |
| <input type="checkbox"/> Athletic | <input type="checkbox"/> Religious |
| <input type="checkbox"/> Greek | <input type="checkbox"/> Service |
| <input type="checkbox"/> Honorary | <input type="checkbox"/> Social |
| <input type="checkbox"/> Multicultural | <input type="checkbox"/> Other _____ |

Organization Web Address (if applicable): _____

Organization's Purpose (please provide a full description): _____

Number of Active Members: _____

Please List the Full Name of EIGHT Student Members:

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

Faculty/Staff Advisor Information

Full Name: _____

Department: _____

Phone Number: _____ E-mail: _____

As an advisor, I authorize that I am the responsible agent for this organization and have also read and understand the policies and procedures in the Blueprint Handbook/Website.

Signature Date

Leadership/Executive Member Information

Office Title	First Name	Last Name	Address	E-mail	Phone	FERPA*
President						
Vice President						
Secretary						
Treasurer						

*The Family Educational Rights and Privacy Act (FERPA) of 1974 allows the college to release Directory Information. Please Place a check in the FERPA column if you DO NOT want your participation/leadership with this organization to be released.

If at any point you need to make a change to your organization,
please send an email to dossorio@culver.edu.

Office Use Only	
Date Received: _____	Staff Member Approval: _____