Proposed organization name: ________________________________ Date form completed: ___________

Contact Information

Student organizer: ________________________________________ ID #: __________________
Phone #: ___________________________ E-mail: ________________________________

Student organizer: ________________________________________ ID #: __________________
Phone #: ___________________________ E-mail: ________________________________

Note: Only one organizer is necessary. She will be the main contact unless otherwise noted.

Group Advisor: ________________________________________ Phone #: __________________
E-mail: ________________________________________________

NOTE: The advisor needs to email studentactivities@alverno.edu to accept the position

Statement of Purpose or Constitution

Attach a statement of purpose and/or a constitution. The statement of purpose should include the mission/vision of the organization, current goals, and how the group will enhance campus life. If you are requesting to organize a chapter of a national organization, please attach any appropriate governing rules, requirement of dues, and other pertinent information.

Type of Student Organization (check the box that best fits your organization):

☐ Academic and Professional
☐ Multicultural
☐ Special Interest
☐ Social Sororities*
☐ Spiritual and Religious**
☐ Student Publications

* Written approval is required from the respective governing council
** Written approval is required from Campus Ministry

Interested Members

At least five current students need to sign up for a new organization to be formed and approved. Once a group has been approved, organizations must have at least three members in order to maintain an active status.

List names and signatures of interested students on attached sheet.
We the undersigned, request permission from the Department of Student Activities & Leadership to organize for the purpose of becoming an officially recognized student organization of Alverno College. If this organization is approved, all members, including officers, are responsible for abiding by regulations pertaining to student organizations and to see that this organization functions according to its approved constitution. We understand that regulations pertaining to Alverno College can be found in the Student Organization Handbook published annually by the Department of Student Activities & Leadership.

Names of interested students

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

Please attach an additional sheet if necessary

Signature of Primary Organizer: ___________________________ Date: _________________

Signature of Advisor: _______________________________ Date: _________________

Office Use Only

__________ 1. Turned in complete Request to Organize form.

__________ 2. Preliminarily approved by the Department of Student Activities & Leadership.

__________ 3. Alverno approval granted by the Student Affairs Advisory Committee.

__________ 4. Meeting with the Director of Student Activities & Leadership.

Please return to the Department of Student Activities & Leadership, AF 202A.