



# SHSU Organizations

*The Total Experience...*

## Organization Update Form (updated 6/2007)

To maintain status as a registered student organization, each organization needs to update their information with Student Activities at the beginning of the fall and spring semesters and before the summer semesters. Please complete this form and return it to the Student Activities office located in LSC 328, or through Campus Mail Box 2507 by 5:00 p.m. If you have any questions, please call us at 294-FUN1.

<b>ORGANIZATION INFORMATION :</b>		<b>Although you may have supplied this same information on a past update, please resubmit. Thank you.</b>
Official Organization Name:		
Name for campus Listing (if different):		
National Affiliation (if applicable):		
Academic Department Affiliation (if applicable):		
Organizational Email Address (if applicable):		
What is the purpose of your organization?		
When are elections held?		
Number of current members:		
Membership qualifications: (certain GPA, classification, major, etc.)		
Are members required to pay dues?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
If yes, how much are dues per semester/year?		
When is the regularly scheduled meeting time, day, and place?		

**\*How would you prefer your organization to be classified? Please check one of the following\***

<b><u>Academic</u></b>	<input type="checkbox"/>	Organizations typically have GPA requirements and members that belong to one college or department
<b><u>Cultural</u></b>	<input type="checkbox"/>	Organizations are comprised of students who share similar cultural backgrounds and maintain their culture through educational and interactive programs
<b><u>Programming</u></b>	<input type="checkbox"/>	Organizations are established to coordinate campus events
<b><u>Recreational</u></b>	<input type="checkbox"/>	Organizations help the campus community to maintain a healthy lifestyle
<b><u>Religious</u></b>	<input type="checkbox"/>	Organizations focus on religious aspects of campus life and are usually associated with a religious denomination
<b><u>Service</u></b>	<input type="checkbox"/>	Organizations concentrate on service to the campus and the community of Huntsville
<b><u>Social Fraternity</u></b>	<input type="checkbox"/>	Organizations MUST be affiliated with a National Organization or be a member of an SHSU Greek governing body
<b><u>Social Sorority</u></b>	<input type="checkbox"/>	Organizations MUST be affiliated with a National Organization or be a member of an SHSU Greek governing body
<b><u>Special Interest</u></b>	<input type="checkbox"/>	Organizations are comprised of students organized to pursue special interests pertaining to lifestyle, social, or societal issues

**\* In accordance with your organization's purpose and/or mission statement, the classification of your organization will be selected by the Coordinator of Student Organizations and approved by the Director of Student Activities.**

**President's Contact Information:** In some cases, the president of the organization is not the contact person. Please fill out the following information so that we may maintain communication effectively.

Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

When will this contact information expire?: \_\_\_\_\_

**Advisor Information:** Advisors are key components within organizations. He or she should serve as a resource person, provide your organization with consistency over the years, and keep you informed about University policies and procedures. If your organization is currently without an advisor, please inform Student Activities immediately. Your organization is responsible for providing your advisor with a list of all officers and their Social Security Numbers and a member roster when possible.

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Department: \_\_\_\_\_ Mailbox Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Advisor Signature ***(this form is invalid without a signature)***: \_\_\_\_\_

Does your organization also have an off-campus advisor?  Yes  No

If yes, please fill out the following:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

**Officer Information:** Please fill out the following information for all officers. This information allows our office to have additional contacts within your organization. We also keep this information in your organization's permanent file, so it could be a key resource in building an alumni roster for your organization. If you have additional officers, please include their information on a separate page.

OFFICE HELD	NAME	PHONE	E-MAIL

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- FOR OFFICE USE ONLY -

Date Received: \_\_\_\_\_ Received by: \_\_\_\_\_ Organization Coordinator Approval: \_\_\_\_\_