

# Student Organization Registration and Re-Certification Packet



Office of Student Activities  
3200 Augusta Tech Drive  
Augusta, GA 30906  
706.771.4019 (phone)  
bcrobert@augustatech.edu

Thank you for your interest in chartering/re-certifying your organization. Please feel free to contact the Office of Student Activities if you have any questions about the application process.

**Augusta Technical College  
Student Organization Registration Form**

\_\_\_\_\_  
Name of Organization

\_\_\_\_\_  
Academic Year

Please list all officer names, address, and phone numbers below. (Use back of form for additional space.)

<b>Name</b>	<b>Position</b>	<b>Local Address</b>	<b>Telephone Number</b>	<b>E-mail</b>
1.				
2.				
3.				
4.				
5.				
6.				
7.				

\_\_\_\_\_  
Signature of Advisor

Date: \_\_\_\_\_

\_\_\_\_\_  
Signature of Student Organizer

Date: \_\_\_\_\_

Return form to the Office of Student Activities in Building 100. Send to the attention of Brian Roberts, Director of Student Activities and Support Services.

The form will be reviewed by the Vice President of Student Affairs.

\_\_\_\_\_ Disapproved. See below.

\_\_\_\_\_ Approved with condition(s). See below.

\_\_\_\_\_ Approved as is.

\_\_\_\_\_  
Vice President of Student Affairs

Date: \_\_\_\_\_

## Student Organization Advisor Registration

I \_\_\_\_\_ agree to accept the responsibility of advisor to  
(individual volunteering to serve as advisor)

\_\_\_\_\_  
(Name of Organization)

I have reviewed the Student Organization Manual and agree to support and abide by the policies defined therein, particularly as they pertain to the duties of advisor. I have agreed to serve in the capacity of advisor for the \_\_\_\_\_ academic year.

Signed \_\_\_\_\_

Date: \_\_\_\_\_

## General Information

What is your organization's purpose?

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Briefly describe the membership guidelines and process of your organization.

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How frequently will this organization meet?

- Monthly
- Weekly
- Bi-weekly
- Quarterly
- Other: \_\_\_\_\_

Type of Organization

- Academic
- Professional
- Honorary
- Religious
- Special Interest
- Media
- Political
- Governance
- Diversity/Multicultural
- Advocacy/Service
- Production/Performance
- International

What location will your organization primarily hold meetings?

- Augusta
- Grovetown
- Thomson
- Waynesboro

Will this organization collect dues?

- Yes
- No

If so, what amount? \_\_\_\_\_

What major event will your organization sponsor?

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Budgetary request. Look at the anticipated needs of your organization in the coming year. Make any requests for funds in the Student Activities budget. List specific needs and anticipated costs.

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What are your proposed program initiatives for the year?

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How is your organization aligned with the mission of Augusta Technical College?

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