Student Organization Registration

Jodie Holava, Student Programs Coordinator - SAC 106 - Phone: 330.462.6177 - Email: holava.1@osu.edu
The Ohio State University ATI

Academic Year: _____

☐ **Re-registration**	☐ **New Registration**
☐ **Academic Club/Organization**	☐ **Social Club/Organization**

Organization Name	
This certifies that the above named organization has applied for registration on the campus of The Ohio State University ATI. Upon approval of this registration the above named organization will considered a Student Organization for one academic year and is entitled to all rights and privileges provided by the Student Activities Office. At that time the organization also becomes subject to all rules, regulations, and disciplinary actions as stated in the Student Organization Handbook.	
Brief Club Description:	
Brief Statement of Purpose:	
Number of Members:	
Organization Social Media Information: (if applicable)	
Organization Web site: (if applicable)	
National Affiliation: (if applicable)	
Types of Activities:	

Constitution and By-Laws:	☐ on file with Office of Student Programming (holava.1@osu.edu)	☐ attached, if applicable (Social Clubs are not required to have Constitution)

Required Signatures:

Faculty/Staff Advisor:		**Date:**	
Student President:		**Date:**	

The leadership of this organization has received and agrees to abide by the procedures listed in the Ohio State University ATI Student Organization Handbook. By signing this registration form, the organization hereby certifies that the information provided above is correct. In the event of any changes to the registration form, the organization agrees to notify the Student Activities Office.

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Contact Information
President (or 1ˢᵗ contact):
E-mail address
Vice President (or 2ⁿᵈ contact):
E-mail address
Treasurer (or 3ʳᵈ contact):
E-mail address
Secretary (or 4ᵗʰ contact):
E-mail address
Student Leadership Council Representative:
Email address
Faculty/Staff Advisor:
E-mail address   Office

Best way to send club information:	☐ E-mail	☐ Text	☐ Student President

I have read the above statement regarding the access of the above information and have obtained permission from those officers listed.	
President's Name:	**President's Signature:**