

Office of Student Life • 1950 Third St., La Verne, CA 91750

Office: (909) 448-4485 • [clubs@laverne.edu](http://clubs@laverne.edu)

<http://sites.laverne.edu/student-life/clubs/>

General Club Advisor, Associate Director: Angie Anderson aanderson@laverne.edu or (909) 448-447­­­­­3

**Student Club & Organization Recognition Form**

For Recognition Consideration: *(Select One & input year)* Fall / Spring

(Recognition process occurs by semester AND every semester. Fall submission begins July 1 / Spring submission begins January 1) (Recognition paperwork will not be accepted before these dates for the following semester status.)

#  **NEW** *Club/Organization* **RENEWAL** *(Existing & Active Club/Organization)*

# **NAME OF CLUB/ORG**:

Today’s Date:

For Club RENEWAL Only: **** NEW UPDATED Constitution included **** USE EXISTING Constitution

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**EXECUTIVE OFFICERS: Undergrad / Grad**

President Name: *(print)* ID# : ** **

Email: Phone#

\*President Signature:

Vice President Name: *(print)* ID# : ** **

Email: Phone#

\*Vice President Signature:

Secretary Name: *(print)* ID# : ** **

Email: Phone#

\*Secretary Signature:

Treasurer Name: *(print)* ID# : ** **

Email: Phone#

\*Treasurer Signature:

**\* GPA MINIMUM REQUIREMENT FOR EXECUTIVE BOARD:**

**Executive Board signatures above indicate permission to verify GPA minimum requirement.**

*The Office of Student Life strictly enforces that all Executive Board Members meet and maintain a 2.50 grade point average, semester and cumulative. GPA will be verified through the Registrar’s office by the General Club Advisor. Semester and Cumulative GPA during term of position will be verified. Failure to meet and maintain the minimum 2.50 requirement will result in ineligibility and removal from Executive Board positions. General club membership roster is not required to meet this minimum but strongly encouraged.*

**Meeting Information:**

Meetings are held: **** Weekly  **** Monthly  ****Other:

Day(s): Time(s): Location:

**On-Campus Club Account:** Do you currently have an on-campus Club Account? **** No **** Yes:

FOAP# - - -

**Organization Webpage** *(if applicable):*

*(This link will be used on the University of La Verne Club website to link your club name to your specific site)*

**Is this club open to Graduate students?** **** No  **** Yes / **Is this club open to CAPA students?** **** No **** Yes

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**STATEMENT OF UNDERSTANDING:**

*We submit our constitution and bylaws (or choose to use existing constitution and bylaws from prior semester) and understand that one of the primary purposes of this club/organization will be to provide services to its members. We understand that the purpose and procedures of the club/organization are to be consistent with the goals and standards of the University of La Verne including regulations involving non-discrimination and hazing. We agree to adhere to the policies set forth by the Office of Student Life.*

*We understand that it is the responsibility of the President of the organization to notify the Office of Student Life of any changes in officers for the club/organization. We further understand that all recognized clubs and organizations are subject to policies set forth by the Associated Students of the University of La Verne, ASULV Constitution and Bylaws and the Office of Student Life. I understand that The Office of Student Life reserves the right to revise, disband, or suspend a club or organization.*

*We understand that it is our responsibility to obtain any correspondence for our club/organization through the president’s email or designated email provided, and from our designated mailbox located in the Office of Student Life.*

**I have read the statement of understanding and agree to abide by it. I allow the Office of Student Life to release my name and email address to any member of the public who may want to learn more about my student club or organization.**

President’s Signature Date President’s Name (Print)

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**CLUB/ORG MISSION STATEMENT:** *This information will be used by the Office of Student Life for distribution to interested students and general public upon request. The Mission Statement here will be included on the University of*

*La Verne Clubs & Organizations Website: http://sites.laverne.edu/student-life/clubs/. Please be brief but detailed on the overarching mission/goal of your club.*

**Advisor Agreement:**

The University of La Verne requires that every recognized student club/organization select a faculty member, administrative professional, or staff member of the University of La Verne to serve as an advisor. The advisor must be a full-time professional for the University of La Verne (classified staff is not eligible). If you are unsure, please check with the Office of Student Life.

**The duties of the club/org advisor are as follows:**

* Problem solving and conflict resolution
* Assist and/or offer direction/supervision in the planning of activities/events, etc. including:
* Approval of on-campus club account expenditures by signature approval (See Signature Authorization Form)
* To offer appropriate guidance and mentorship as it pertains to the mission, goals, and leadership of the club/org.
* To serve as a consultant to the club/organizations’ members
* Liaison between student organization and the University faculty, staff, administration, etc.
* Responsible for ensuring that the organization follows University policy and procedure

 **Responsibilities of a student club/organization advisor:**

 A. The advisor is to be familiar with the club’s/organization’s constitution, budget, calendar of activities, and the University of La Verne policies and procedures.

 B. The advisor should make every effort to attend club meetings, events, etc.

(Presence at large scale, high profile, and/or high risk events where supervision may be required or may be deemed mandatory by the Office of Student Life or University of La Verne Risk Management).

 C. The advisor is strongly encouraged to attend off-campus club/organization functions.

 D. The advisor is required to attend a meeting of all club and organization advisors if called by the Office of Student Life

 E. Inform the Office of Student Life of any concerns or issues involving members or club business

 F. The advisor is to encourage the club or organization to function within University guidelines, and not condone any activity that is not in keeping with the spirit of University policy.

 G. Provide goals and enrichment to reach club success!

Advisor/Organization Relationship Statement:

I have read and am familiar with the responsibilities of being a club/organization advisor. I understand and accept all of the requirements that go along with this position. I also understand that this may be a semester or year commitment based on the agreement of the club and its members. My term as advisor may be revoked at any time by the student club membership. If for any reason I am unable to continue with said responsibilities, the Office of Student Life will be immediately notified in writing of my resignation.

Advisor Name (Print) Date Advisor Signature

Title Campus Location *(Main, Law School, Regional…etc)*

Advisor Contact Number / Extension Advisor Email

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