**Southern Arkansas University**

**Prospective Student Organization Application**

\*\*Please attach an Organization Constitution, Purpose Statement, and Membership Eligibility and Requirements list, in accordance with the Student Handbook and return to the Office of Student Activities, Reynolds Center 201, with the completed Prospective Student Organization Application.

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

Type of Organization: (Check One)

\_\_\_Academic \_\_\_Arts \_\_\_Graduate \_\_\_International \_\_\_Political \_\_\_Honorary \_\_\_Media \_\_\_Religious \_\_\_Sports/Rec. \_\_\_Greek \_\_\_Educational \_\_\_Service \_\_\_Social \_\_\_Other

If other please explain: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| Member Name: | Address: | Phone: | E-Mail: | Position (If Applicable): |
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(Attach additional sheet if needed)

Faculty Advisor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Slot: \_\_\_\_\_\_\_\_\_\_\_ SAU Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**HAZING POLICY**

ALL Prospective SAU Organizations must also complete the following:

This is to certify that I have received and read the university Hazing Policy and that I will make the content of these statements known to current members and potential members of my organization.

Organization President: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature

Organization Advisor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature

STUDENT HANDBOOK

I have received the Student Handbook and will take full responsibility for ensuring that all members of my organization are fully aware of and understand the policies/procedures contained in this publication.

Organization President: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature

HOLD HARMLESS STATEMENT

The organization signified shall release, indemnify, and hold harmless Southern Arkansas University, its agents and employees, from and against any and all claims, lawsuits, damages, or liability of any kind which might arise from the acts of the organization or its agents arising out of the use of the premises and facilities of Southern Arkansas University and shall without delay notify the University (through the Office of Student Activities, 201 DWR) of any and all accidents, losses, damage, or claims which might arise in connection therewith.

Organization President: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature

\*\*FOR OFFICE USE ONLY\*\* \_\_\_\_\_: Approved

Student Activities: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SGA President: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student Affairs Committee: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Vice President Student Affairs: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Constitution: \_\_\_\_\_\_\_\_\_ Purpose: \_\_\_\_\_\_\_\_\_ Membership Eligibility: \_\_\_\_\_\_\_\_\_