



Murray State College NEW STUDENT CLUB/ORGANIZATION PROCEDURE and APPLICATION

Proposed Club/Organization Name: _____

Application:

1. All New applications must be submitted to the Director of Student Life.
2. It is necessary to have at least 2 contact student representative names, e-mails, and phone numbers.
3. The proposed advisor must be full time employee of Murray State College. A letter of agreement must accompany the completed application at the time of submission.
4. The proposed charter must accompany the completed application.
5. The proposed constitution must accompany the completed application.
6. The proposed strategic plan must accompany the completed application.

You can reserve space for one meeting for the purpose of discussing the application and/or constitution.

If you have questions or need help completing your application and constitution/bylaws/strategic plan, please do not hesitate to contact the Director of Student Life.

Submission: Dated application submitted: _____

1. The Director of Student Life shall verify completeness of the application and verify information.
2. The Director of Student Life shall review the application and shall Approve/Deny or Modify.
3. If approved by the Director of Student Life, the application shall be submitted to the Vice President of Student Affairs for final approval or denial of the Club/Organization.
4. The Director of Student Life shall notify the representatives that their application has been approved and they must complete the MSC Student Club/Organization Registration Form which includes the election of officers.

Chartering Process Complete: Date: _____



MURRAY STATE COLLEGE
STUDENT CLUB/ORGANIZATION APPLICATION

1. CLUB/ORGANIZATION NAME:

2. NAMES, EMAIL ADDRESSES, AND PHONE NUMBER OF (at least) 2 STUDENTS WHO ARE SUBMITTING THIS PETITION:

Name: _____ Email Address: _____
Home Phone: _____ Cell Phone: _____

Name: _____ Email Address: _____
Home Phone: _____ Cell Phone: _____

Type answers for numbers 4-6 on a separate sheet of paper to be attached to the application.

3. Proposed Advisor

ATTACH to this application a signed typewritten statement from a full time employee of Murray State College agreeing to serve as advisor of the proposed student club/organization.

- 4. **Club/Organization Charter:** Statement of rights and responsibilities of club/organization membership.
- 5. **Club/Organization Constitution:** Statement of aims, principles and procedures of the club/organization. The constitution should include: Rules and membership offices to the established.
- 6. **Club/Organization Strategic Plan:** Statement about the strategy, or direction, and making decisions on allocating its resources to pursue this strategy.

DO NOT WRITE BELOW THIS LINE.
FOR OFFICE USE ONLY:

SIGNATURES:

Director of Student Life

Date

Vice President of Student Affairs

Date



Murray State College

_____ Year Student Club/Organization Registration Form

Club/Organization Name _____

Number of Members (Approx.) _____ Meeting Place _____

Meeting Day/Time _____ Frequency of Meetings _____

President: I agree that the activities of the Club/Organization named above will be conducted in accordance with the local, state, and federal law, its own constitution, and the policies and procedures governing student Club/Organizations set forth by Murray State College and published (but not limited to those) in the Murray State College Handbook and Code of Conduct. I certify that the information appearing above is correct and may be released as directory/handbook information; I also agree that our Club/Organization will not discriminate on the basis of race, nationality, ancestry, sex, age, or handicap in the selection of members or programs.

Signature of Club/Organization President

Date

Advisor: I have reviewed the policies pertaining to the student club/organizations and Code of Student Conduct in the Murray State College Handbook. I am familiar with the contents and I am currently employed at Murray State College or AHEC as a full time employee. I hereby agree to be a faculty/advisor for this club/organization.

Signature of Advisor

Date

Elected Executive Officers and Representatives of the Club/Organizations

President/SGA Rep _____

Phone _____ Email _____

Vice President/Media Relations _____

Phone _____ Email _____

Secretary/Treasurer _____

Phone _____ Email _____