



**NEW STUDENT CLUB/ORGANIZATION
REQUEST FOR APPROVAL FORM**

**You will receive notification from the Office of Student Life
no later than one week from the date submitted.**

Submitted by: _____ Date: _____

Proposed name of student organization: _____

Purpose and mission of the organization: _____

Requirements for membership: *If the organization will be a chapter of a national organization, you must include charter guidelines as well.* _____

List dates, times and locations for this organization's meetings. _____

Advisor Information: The advisor of any student organization must be a full-time staff or faculty member of Wilmington University.

Name of advisor (required): _____ Phone #: _____ Email: _____

I understand my role and responsibility of being an advisor and agree to abide by the Guidelines for Student Organizations and all University policies.

Signature of Advisor

- Approved**
 Not Approved _____

Signature of SGA President

Date

Signature of Director of Student Life

Date

