

Date _____



UNIVERSITY OF KENTUCKY

New Student Organization Registration

(Office Use Only)	
Received _____	
Checked by _____	
Approved by _____	
Date Approved _____	
Copy _____	Posted ____/____/____

(Please Print)

NAME OF ORGANIZATION _____

CAMPUS/LOCAL _____ SPEED SORT/ _____

MAILING ADDRESS _____ ZIP CODE _____

ORGANIZATION UK WEB PAGE ADDRESS _____

NATIONAL OR LOCAL AFFILIATION, IF ANY _____

ADDRESS OF NATIONAL OR LOCAL HEADQUARTERS _____

PURPOSE OF ORGANIZATION (100 characters or less) _____

TYPICAL PROGRAMS _____

APPLYING FOR REGISTRATION AS (Check one applicable):

- SOCIAL SORORITY OR FRATERNITY _____
- HONOR, LEADERSHIP, OR RECOGNITION SOCIETY _____
- DEPARTMENTAL ORGANIZATION/PROFESSIONAL FRATERNITY _____
- POLITICAL ORGANIZATION _____
- GOVERNMENTAL ORGANIZATION _____
- SPECIALTY ORGANIZATION (religious, athletic, military, etc.) _____

Types and Classes of Membership

(Membership restricted to Students, Faculty, and Staff of the University of Kentucky)

To Whom Open: **STUDENTS** _____ **FACULTY** _____ **STAFF** _____

ELIGIBILITY REQUIREMENTS FOR MEMBERSHIP

Financial Obligations of MEMBERS IN THE ORGANIZATION:

DUES _____ AMOUNT RETAINED BY CAMPUS ORGANIZATION _____

AMOUNT TO NATIONAL/LOCAL ORGANIZATION _____

TIME OF PAYMENT _____

PLEDGE FEE _____ AMOUNT RETAINED BY CAMPUS ORGANIZATION _____

TIME OF PAYMENT _____

INITIATION FEE _____ AMOUNT RETAINED BY CAMPUS ORGANIZATION _____

AMOUNT TO NATIONAL/LOCAL ORGANIZATION _____

TIME OF PAYMENT _____

HOUSING REQUIREMENTS FOR MEMBERS, IF ANY _____

OTHER SOURCES OF INCOME FOR THE ORGANIZATION, IF ANY _____

NAME OF ORGANIZATION _____

SELECTION AND QUALIFICATION OF OFFICERS

Qualifications of Officers _____

Time of Election _____

Term of Office _____

REQUIRED ADDITIONAL DOCUMENTS TO BE SUBMITTED AS A PART OF THE APPLICATION

1. A copy of all campus and/or national/local constitutions and by-laws governing the organization.
2. The attached affirmative action statement signed by students, faculty, and/or staff seeking registration for the organization and certifying that the organization is in compliance with and will continue to comply with regulations governing Time, Place, and Manner Article III of the CODE OF STUDENT CONDUCT, with the "Rules and Additional Criteria for Registration of Student Organizations" and with the "Regulations Governing the Use of University Facilities by Registered Student Organizations."

ADVISORS (Complete as required in the Code of Student Conduct, Section 3.24)(Advisor Requirements: Sororities, fraternities, political, and governmental groups require a faculty advisor and university advisor; honoraries and departmental groups require a faculty advisor; specialty groups require a faculty advisor and a sponsor.)

Faculty Advisor _____ Department _____

Campus Address _____ Speed Sort _____ Phone _____

Signature _____ E-Mail Address _____

University Advisor _____ Department _____

Campus Address _____ Speed Sort _____ Phone _____

Signature _____ E-Mail Address _____

Sponsor _____ Address _____

Signature _____ Phone _____ E-Mail _____

Organization Summer Mailing Address:

Name _____
Address _____
City _____ State _____ Zip Code _____

NAME OF ORGANIZATION _____

Local/Campus Address _____

RESERVATION OF UNIVERSITY FACILITIES

Student Organizations may designate in this section a **University of Kentucky authorized member** of the organization who will have authority to reserve University facilities in addition to the officers listed below. This section is optional.

Additional Student (Please Print)

Authorized Member _____ Phone _____

Campus/ _____ Speed Sort/
Local Address _____ City _____ State _____ Zip Code _____

Signature _____ E-Mail _____

Although the primary responsibility for the organization's debts and other obligations to the University rests with the organization itself, the individual officer, by signing this application, acknowledges individual responsibility for insuring that these debts and obligations are paid. By signing the application below, each officer certifies that he/she has reviewed the application and additional documents which are submitted as a part of it. Further, he/she certifies that he/she understands and accepts the provisions of the statement above regarding responsibilities for debts and obligations of the organization.

Officers who are authorized to reserve University facilities for the organization should be designated by checking the appropriate response adjacent to the "Reserve Facilities" heading.

OFFICERS - PLEASE FILL OUT THE INFORMATION BELOW (Please print)

President _____ S.I.D.# _____ Phone _____
Campus/ _____ Speed Sort/
Local Address _____ City _____ State _____ Zip Code _____

Signature _____ E-Mail Address _____

College Registered _____ RESERVE FACILITIES: YES _____ NO _____

Example: Arts and Sciences, Engineering, Fine Arts, Medicine, etc.

Vice-President _____ S.I.D.# _____ Phone _____
Campus/ _____ Speed Sort/
Local Address _____ City _____ State _____ Zip Code _____

Signature _____ E-Mail Address _____

College Registered _____ RESERVE FACILITIES: YES _____ NO _____

Example: Arts and Sciences, Engineering, Fine Arts, Medicine, etc.

Secretary _____ S.I.D.# _____ Phone _____
Campus/ _____ Speed Sort/
Local Address _____ City _____ State _____ Zip Code _____

Signature _____ E-Mail Address _____

College Registered _____ RESERVE FACILITIES: YES _____ NO _____

Example: Arts and Sciences, Engineering, Fine Arts, Medicine, etc.

Treasurer _____ S.I.D.# _____ Phone _____
Campus/ _____ Speed Sort/
Local Address _____ City _____ State _____ Zip Code _____

Signature _____ E-Mail Address _____

College Registered _____ RESERVE FACILITIES: YES _____ NO _____

Example: Arts and Sciences, Engineering, Fine Arts, Medicine, etc.

**NOTE: The students listed above will be ineligible to serve as an officer if they are:
1) On academic probation; 2) Not enrolled in the current semester; 3) Financially delinquent to U.K.**

NAME OF ORGANIZATION _____

DATE _____

We, the undersigned, request that the organization named above be granted registration as a student organization of the University of Kentucky. We certify that this organization is presently in compliance with and will continue to comply with Regulations Governing Time, Place, and Manner, Article III of the Code of Student Conduct in the STUDENT RIGHTS AND RESPONSIBILITIES handbook, with the "Rules and Additional Criteria for Registration of Student Organizations" and with the "Regulations Governing Use of University Facilities by Registered Student Organizations." Further, we understand that failure to comply with any of the above-mentioned documents may subject the organization to refusal or cancellation of registration.

In accordance with administrative regulations, a minimum of five (5) currently enrolled students (officers and/or members) must sign this form.

PRESIDENT _____

VICE-PRESIDENT _____

SECRETARY _____

TREASURER _____

ADVISOR _____

OTHERS _____
