



# Student Organization Account Application

Date: \_\_\_\_\_

Academic/Fiscal Year: \_\_\_\_\_

Check one:  New group  Established group

Check boxes that apply  CCCA Chartered Group  Independent Group

***Our group is a CCCA chartered group and we are receiving an award in the amount of \$\_\_\_\_\_ in the current fiscal year. At this time, we decline the privilege to open a new student organization account (FUND '82xxxx') or maintain our existing account.***

Name of student group: \_\_\_\_\_

Name of group's officers (list at least two):

\_\_\_\_\_  
\_\_\_\_\_

Name of group's faculty/staff advisor(s):

\_\_\_\_\_  
\_\_\_\_\_

Contact phone numbers:

\_\_\_\_\_  
\_\_\_\_\_

Contact email addresses:

\_\_\_\_\_  
\_\_\_\_\_

Deposit amount:  
*Minimum balance required \$250*

\$

Please provide a brief description of the purpose (s) for this account:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

***We have received and read the Student Organization Account Policy and we agree with its terms and conditions. By signing this application, we accept full responsibility for the management of our student group's account for the academic/fiscal year listed above. We also understand that if this account becomes overspent, the Business Office will follow the termination process described in the policy.***

\_\_\_\_\_  
Officer # 1 Signature

\_\_\_\_\_  
Officer # 2 Signature

\_\_\_\_\_  
Officer # 3 Signature

\_\_\_\_\_  
Officer # 4 Signature

\_\_\_\_\_  
Faculty/Staff Advisor's Signature

Received By:

Date:

\_\_\_\_\_  
Business Office Representative

\_\_\_\_\_

**BUSINESS OFFICE USE ONLY**

**Account Status:**       **Good**       **Fair**       **Overspent**       **N/A**

**Application Status:**       **Approved**                       **Denied**

**Approved By:**

**Fund/Org #:**