

# OFFICER UPDATE

## Student Organization

### 2003-2004

According to the Student Affairs Handbook, a registered student organization is responsible to update the Center for Campus Life of any changes in officers within ten (10) university working days from the day in which the change occurs. Complete and submit to the Center for Campus Life, Room 201 Student Union Building. For questions call 806/742-LIFE(5433) or fax 806/742-0138.

Student Organization's Name *(no acronyms)*: \_\_\_\_\_

*Please complete the following by typing or printing clearly.*

#### **PRESIDENT** (ALL FIELDS ARE REQUIRED)

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Local Address: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Local Phone Number: \_\_\_\_\_ Summer Phone Number: \_\_\_\_\_

Summer Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

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

#### **TREASURER** (ALL FIELDS ARE REQUIRED)

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Local Address: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Local Phone Number: \_\_\_\_\_ Summer Phone Number: \_\_\_\_\_

Summer Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

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

#### **MANDATORY ADVISOR APPROVAL** (ALL FIELDS ARE REQUIRED)

\*Name: \_\_\_\_\_ \*Office Phone Number: \_\_\_\_\_

\*Department: \_\_\_\_\_ \*Office Mail Stop Number: \_\_\_\_\_

\*E-mail Address: \_\_\_\_\_ \*Faculty: \_\_\_\_\_ \*Staff: \_\_\_\_\_

\*Advisor Signature: \_\_\_\_\_ \*Date: \_\_\_\_\_

