

AMERICAN UNIVERSITY OF BEIRUT
OFFICE OF STUDENT AFFAIRS
DEPARTMENT OF STUDENT ACTIVITIES
Student Organization Registration Form

Please complete this form in details and submit it to the Department of Student Activities as soon as possible to ensure the fast processing, and registration of your organization. It is important that the attached table be completed and returned with the form to the Office of Student Affairs. All forms missing the consent of at least 30 members shall not be regarded, and thus you will lose the chance of officially registering your organization.

Proposed Name of Organization and year of registration:

Organization's goal (This refers to what the organization intends to achieve. Please make it as specific as possible):

Organization's objective (This should specify what you intend on doing in order to achieve your organization's goals):

To help in executing your objective, please specify at least two activities you plan on conducting while your organization is active:

- _____

- _____

Propose names of those who will make up the organizations cabinet:

President: _____ **Phone number:** _____

Vice-President: _____ **Phone number:** _____

Secretary: _____ **Phone number:** _____

Treasurer: _____ **Phone number:** _____

Member at Large: _____ **Phone number:** _____

To ensure the fast processing of your application, please make sure the following section is completed by your chosen Advisor.

I certify that I have revised and accordingly accept the goal and objective of this organization. As such, I willingly accept being the Advisor of this group and will thus perform my duties as is specified by my position and listed in the Bylaws for Student Organizations.

Name of Advisor: _____ **Signature:** _____

