



Club & Organization Officer Update Form

South Dakota State University

Date Received: _____ OSA Staff Initials: _____
Updated in computer: _____

Please return this completed form to the Office of Student Activities (The Union – Room 140, Box 2815, 688-6129).

Name of organization: _____

President: _____
Name Address Phone E-mail

V. President: _____
Name Address Phone E-mail

Secretary: _____
Name Address Phone E-mail

Treasurer: _____
Name Address Phone E-mail

Other: _____
Name Address Phone E-mail

Primary Advisor: _____
Name Campus Address Phone E-mail

Other Advisor: _____
Name Campus Address Phone E-mail

May the Office of Student Activities share your e-mail addresses with students interested in your organization or club? Yes No

Please provide the following additional information:

Date of current constitution: _____ Officer election date: _____
It is understood that the constitution on file in the Office of Student Activities is the present constitution for this organization.

Type of financial account(s) identified in constitution: _____ On-campus _____ Off-campus

Index number (if on-campus): _____

Name of bank (if off-campus): _____

Please note information on your group's meetings: _____
Day/Time/Place

Organization e-mail address: _____

Website address: _____

Webmaster: _____
Name Address Phone E-mail