



## **Off-Campus Affiliation for a Texas State Student Organization**

Proposed Name of Organization: \_\_\_\_\_

Primary Purpose of the Organization: \_\_\_\_\_

\_\_\_\_\_

Membership Requirements: \_\_\_\_\_

\_\_\_\_\_

Name of Off-Campus Affiliation: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone # \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Email Address: \_\_\_\_\_

Student Filing for Affiliation: \_\_\_\_\_ Phone # \_\_\_\_\_

Local Address: \_\_\_\_\_

Phone # \_\_\_\_\_ Email Address: \_\_\_\_\_

Faculty/Staff Advisor: \_\_\_\_\_ Phone # \_\_\_\_\_

Campus Address: \_\_\_\_\_

Email Address: \_\_\_\_\_

A student group interested in organizing and applying for affiliated status may be granted a sixty (60) day permit to use campus facilities for the purpose of completing its organization and for recruiting members. This permit does not include the right to sponsor an all-campus event or use the name of the university.

It is understood and agreed that the proposed organization will adhere to conditions for affiliated student organizations listed in the Student Organization Handbook and understands its obligations to Texas State University.

### Signatures:

\_\_\_\_\_  
Off-Campus Affiliation Contact Person

\_\_\_\_\_  
Date

\_\_\_\_\_  
Student Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Faculty/Staff Advisor

\_\_\_\_\_  
Date