



Club/Organization Annual Report Packet

EXISTING CLUBS/ORGANIZATIONS: Please complete the items on this checklist and all required forms at the end of each academic year, but **no later than September 1 of the new year.**

- Re-familiarize yourself with **Columbia State Policy Number 03:01:00: *Student Organizations and Clubs***. The policy can be accessed [here](#).
- Complete the Annual Report Packet
 - Year-End Financial Report (attached)
 - Activity Report (attached)
 - NEW registration form to register your club for next year (with roster of members) (attached)
You MUST register every year in order for your club to remain active!
- Attach an updated Constitution or Statement of Purpose, if applicable
If you need a copy of your previously submitted constitution/purpose statement, please contact student services.

*Please report any broken links to sga@columbiastate.edu.
All of these forms can be found separately on the Student Organization website.*

What happens if my organization doesn't submit this? Failure to complete the required packet by September 1 may result in NON-RECOGNITION status for your organization for the next academic year, meaning your group cannot request funds, host events or meetings on campus, hold fundraisers, hand flyers/advertise, etc.

TO BE SIGNED AND SUBMITTED AT THE END OF EACH YEAR.

I have reviewed the contents of this packet and ensure all to be accurate to the best of my knowledge.
I have completed a new registration form, if applicable.

Club/Organization Name: _____

Sponsor: _____ Date: _____

President (or other student designee): _____ Date: _____



Club/Organization Year-End Financial Report

Registered student organizations must complete this report at the conclusion of the academic year. Reports are due no later than September 1 of the new academic year. Please return to the office of Student Enrollment, Engagement, and Services (JSC 147) or to SGA@ColumbiaState.edu.

**Note: All expenditures must be transmitted through a club account in the business office. Use of other cash funds or outside bank accounts is prohibited.*

Name of Organization: _____

Fiscal year beginning July 1, 20____ and ending June 30, 20_____.

- Please check here if you do NOT have a club account and did not handle ANY funds during the registration period. Skip to signature section.

Beginning Balance: \$ _____

Organization Income (itemize each source of income):

_____ \$ _____
 _____ \$ _____
 _____ \$ _____
 _____ \$ _____
 _____ \$ _____

Total Income for Year: \$ _____

Expenses (itemize each expense; use separate sheet if needed):

_____ \$ _____
 _____ \$ _____
 _____ \$ _____
 _____ \$ _____
 _____ \$ _____

Total Expenses for Year: \$ _____

Ending Balance: \$ _____

_____/_____/_____
 Signature of Organization President/Treasurer Date

_____/_____/_____
 Signature of Advisor Date

For Office Use Only: RECEIVED ON: _____ INITIALS: _____



Club/Organization Activity Report

Name of Organization: _____

Current number of Active Members: _____ **Organization Level:** I II

Next semester's President (Level I) or student point of contact (Level II) information:

Name: _____

Email: _____ **Phone:** _____

Please list additional officers' names and information, if applicable:

Position	Name	Email Address

Did you edit your organization's constitution or purpose statement this past year? Yes No

**If yes, please attach updated copy or email to SGA@ColumbiaState.edu*

Please briefly describe any events or activities that your organization has been involved with this year. Include dates, location, and purpose (attached additional sheet if needed):

Current Advisors:

**Please have new advisors complete an advisory support statement and include with this packet.*

Name	Title	Email

Person completing this form: _____

Email: _____ **Phone:** _____

For Office Use Only:

RECEIVED ON: _____ INITIALS: _____



STUDENT ORGANIZATION APPLICATION FOR REGISTRATION

Name of Organization _____

Date: _____ Registration Period: _____

Registration Status: (Select one) Level I _____ Level II _____

Applicants must attach appropriate documentation required for the registration status chosen. See Columbia State Policy Number 03:01:00: *Student Organizations and Clubs* for more information.

STATEMENT OF CERTIFICATION

“In seeking registration, the above named organization certifies that it will comply with all applicable rules, policies, regulations, and procedures of the Tennessee Board of Regents and Columbia State Community College and with all federal, state, and local laws and regulations.”

Print Name	Student ID Number	Signature

Attach additional sheet if necessary.

Columbia State Employee Sponsor(s):

For Office Use Only

Registration: Approved _____ Approved with Conditions _____ Disapproved _____ Date _____

Terms of Conditions: _____

Signed: _____

Associate Vice President for Student Services