



**CLUBS AND ORGANIZATIONS ADVISOR
AGREEMENT FORM
2005-2006**

In order to be considered for official recognition, every student club/organization must have a full-time faculty/staff advisor. The advisor is an integral part of every campus organization and thus should be selected with care. The advisor's primary functions are to advise and guide the organization and also to act as a resource person for the organization.

Advisor Name: _____

Department: _____

Phone: _____

Title: _____

Staff or Faculty

As an advisor for _____, (club / organization name)
I agree to assume counseling and informational roles in relation to the organization by:

1. Assisting the organization in identifying its yearly goals and aiding in the clarification of member and officer responsibilities within the group.
2. Being an advocate for the clubs/organizations program.
3. Regularly attending scheduled meetings and being informed of all plans of action.
(This means a minimum of one third of the events).
4. Actively participating in the planning of all on and off campus activities as well as advising the risk to to avoid negligence.
5. **Reviewing and signing all purchase orders, check requests, contracts, funding requests and any other related financial documents.**
6. Scheduling specified times during the year which organization members may consult with him or her.
7. Serving as a resource person to help in resolving problems and issues confronting the group through alternative solutions.
8. Assisting in the transition between incoming and outgoing officers.
9. Attending an advisor workshop held through the Office of Communiversity.
10. Attending or providing an alternative faculty / staff member to attend the departure of any trip or outing sponsored by the organization.
11. Administering an end of the semester evaluation.
12. If the Advisor does not adhere to the prestated policies he or she risks immediate removal.

I further understand that I must notify the Director of Communiversity or the Coordinator for Clubs and Organizations in the Office of Communiversity immediately and in writing if, for any reason, I am unable to continue with my responsibilities.

Signature

Date

Yes, I have received my manual.