

Sponsored Student Organization Advisor Form

I acknowledge that I have read [University Rule 6-401A](#) and understand that sponsoring the student organization listed on this form inherently links my department and the University to the student organization. The student organization must use department financial accounts and will have access to University trademarks and tax identification number in accordance with University policy. As the advisor for the sponsored organization, it is part of my job responsibilities to oversee the activities of the organization. I also acknowledge that my department will be responsible for maintaining compliance with [University Policies and Procedures](#) as well the [Department of Student Leadership & Involvement](#).

Name

Email

Sponsoring Department

Name of Student Organization

I acknowledge that I have spoken with the Department Head /College Dean listed above and both of us understand the relationship our department is establishing with the student organization listed above.

Signature

Date (mm/dd/yyyy)

Does your RSO plan to provide patient or medical care? If yes, the RSO will need to be sponsored and receive explicit approval from the Dean of your college.

(patient/medical care is defined as: Rendering medical, surgical, dental, or nursing treatment, including the furnishing of food or beverages in connection therewith, or in furnishing or dispensing drugs or medical, dental, or surgical supplies or appliance).

Yes

No

Please attach proof of department consent below (screenshot of email, PDF of letter of consent, etc.)