



**OFFICE OF STUDENT LIFE  
OCALA CAMPUS  
CLUB/ORGANIZATION  
CHARTER REQUEST FORM**

**This form must be typed.**

Name of student requesting club/organization: \_\_\_\_\_

Student telephone: \_\_\_\_\_ Student email: \_\_\_\_\_

Name of club/organization: \_\_\_\_\_

Purpose of club/organization: \_\_\_\_\_

How does club/organization plan to realize its purpose?  
(meetings/activities/events/projects/service/etc.) Please be specific:

Semester club/organization will become active:  Fall  Spring

Advisor Name: \_\_\_\_\_

Email Address: (first seven letters of the advisor's last name and the first initial of first name) \_\_\_\_\_ @cf.edu

Email is the primary method of contact between the Office of Student Life and advisors. Forms, reminders, and updates will all be sent via email.

Telephone No.: \_\_\_\_\_

\_\_\_\_\_  
Advisor Signature

\_\_\_\_\_  
Date: MM/DD/YY

Date received in Office of Student Life: \_\_\_\_\_  
Date: MM/DD/YY

\_\_\_\_\_  
Director of Student Life Signature

\_\_\_\_\_  
Date: MM/DD/YY

\_\_\_\_\_  
Vice President for Student Affairs Signature

\_\_\_\_\_  
Date: MM/DD/YY

- The above club has satisfactorily completed charter requirements, and a charter for this organization is approved.
- The application for this club charter has been reviewed and is denied.