

Accreditation of Student Organization Application Form

All groups who wish to become an Accredited **Campus Group** or **Academic Society** must submit the following information to the Office of Student Affairs electronically (studentaffairs@carleton.ca) or by hard copy to room 430 Tory. Interested student organizations may apply for accreditation as Campus Groups or Academic Societies at any time during the academic year. The accreditation period will conclude on September 30th By completing and signing this form, student organization executive members understand and agree to abide by the regulations set out in the Policy on the Accreditation of Student Organizations. This form applies the university's Accreditation process; it is not affiliated with CUSA's Club and Society certification program in any way.

* It is mandatory to complete all fields in this form.

Should you have questions about its completion, please contact: studentaffairs@carleton.ca

1. Student Organization Information

Name of Student Organization & Acronym (if applicable): _____

Description of Organization: _____

Organization E-mail: _____

Main Contact for Student Organization:

Full Name: _____ Student Number: _____

Telephone number: _____ Carleton email: _____

2. Student Organization Executives (President, VP's, etc.)

1. Name _____

Title: _____

Student Number: _____

Telephone Number: _____

E-mail: _____

2. Name _____
Title: _____
Student Number: _____
Telephone Number: _____
E-mail : _____

3. Name _____
Title : _____
Student Number : _____
Telephone Number : _____
E-mail : _____

3. Student Organization Constitution or Mission Statement

All student organizations who wish to be accredited by the Office of Student Affairs must submit a copy of their Organization's most up-to-date Constitution and/or Mission Statement appended to this form. Failure to provide this documentation will prevent your application from being considered.

Authorization of Faculty or Staff Advisor

***For Academic Societies ONLY**

Department Affiliation: _____

Faculty or Departmental Staff Advisor: _____

Advisor Phone Ext: _____ Advisor E-mail: _____

Membership List

As per the Policy on the Accreditation of Student Organizations, student organizations must provide a **minimum** of ten (10) student signatures along with their printed names and student numbers of students who are supportive of the organization being accredited. Students must be actively enrolled in courses at Carleton University.

Number of Members (including this list and all others): _____

Name	Student Number	Signature	Date
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			

Agreement

The below named representatives from the Student Organization acknowledges that they have read the Accreditation of Student Organization Policy, understand it and agree to be bound by it.

Student organizations may apply for accreditation as Campus Groups at any time during the academic year. The term of this agreement shall be from the date of accreditation until September 30th annually. Groups seeking continued accreditation beyond a particular academic term/year should apply for renewal no later than September 30th in the next academic year.

By signing this agreement, each Student Organization (Campus Group or Academic Society) seeking accreditation agrees that they comply with the Ontario Human Rights Code and will not exclude individuals seeking membership based protected grounds.

By signing this agreement, each student organization (Campus Group or Academic Society) seeking accreditation understands that they cannot be accredited by University and certified by the Carleton University Students' Association simultaneously.

It is also understood that the Office of Student Affairs will not issue any financial funding or collect any mail or delivery packages on behalf of the Student Organization.

Failure to abide by this agreement may result in the student organization losing its accreditation status along with all the benefits pertaining thereto. The individuals who have violated this agreement may also face sanctions under the university's Student Rights and Responsibility Policy.

Representative from the University (Office of Student Affairs) for *Campus Groups*:

Director of Student Affairs Signature Date

Representative from the University (Faculty Dean or Designate) for *Academic Societies*:

Dean or Designate Position Signature Date

Representatives from the Student Organization (requires a minimum of one signature)

Name (please print) Signature Date

Name (please print) Signature Date

Name (please print) Signature Date

The personal information requested on this form is collected in accordance with Sections 38(2) and 41(1) of the Freedom of Information and Protection of Privacy Act (FIPPA), R.S.O.1990, c.F.31 as amended. The information provided will not be used for any purposes other than those stated upon this form unless the applicant provides express written consent. Should you have any questions concerning your personal information, please contact Robert Moher, FIPPA representative for Carleton University (607 Robertson Hall, 613-520-2600 ext. 2047). Carleton University is fully compliant with FIPPA and endeavours at all times to treat your personal information in accordance with this law.