APPENDIX A

CONSTITUTION OF
ST. AMBROSE UNIVERSITY

Article I
Name, Purpose, and Membership

Section 1. The name of this organization will be ________________.

Section 2. The purpose of ________________ shall be:

2.1
2.2

Section 3. Membership

3.1 Membership in this organization is open to all students of St. Ambrose University.
3.2 No person shall, on the grounds of race, color, national origin, religion, age, sex, marital status, disability, veteran status, sexual orientation, gender identity, or such other factors that cannot be considered lawful, be excluded from participation in, denied the benefits of, or be subjected to discrimination under any program or activity within this organization.

ARTICLE II
Officer and Duties

Section 1. The Executive Council shall consist of the following:

1.1 President
1.2 Vice President
1.3 Secretary
1.4 Treasurer

Section 2. The purpose of the Executive Council:

2.1 Shall be the planning and legislative body.
2.2 Shall fulfill the policies enacted by this organization.
2.3 Shall have the power to initiate programs and activities for all members.
2.4 Shall have the power to direct grievances and resolutions to the members.

Section 3. Duties of the President:
3.1 Preside at and conduct all meetings.
3.2 Shall act as the official host and representative of this organization in campus functions.
3.3 Shall be responsible for implementing legislation enacted by the organization.
3.4 Shall be responsible, with the consultation of the Executive Council, to see that this constitution is adhered to.
3.5 Shall have the power to call emergency meetings when necessary.

Section 4. Duties of the Vice-President:

4.1 Shall fulfill the duties of the president as stated in Section 3 during the absence of the president.
4.2 Shall oversee the committees of this organization.

Section 5. Duties of the Secretary:

5.1 Shall be responsible for maintaining accurate minutes of all meetings.
5.2 Shall be responsible for correspondence to other organizations and individuals.
5.3 Shall be responsible for maintaining an accurate record of member attendance at all meetings.

Section 6. Duties of the Treasurer:

6.1 Shall keep a record of finances of this organization.
6.2 Shall be responsible for collecting the stated dues from each member.
6.3 Shall give a financial report at each meeting.

ARTICLE III
Election Rules and Regulations

Section 1. Election of officers will be held on an annual basis.

Section 2. The offices of President, Vice-President, Secretary, and Treasurer will be elected during the April meeting.

Section 3. This election will utilize a written ballot, with a simple majority determining the winner.

ARTICLE IV
Removal and Succession
Section 1. Removal

1.1 Violation of or disregard for any part of this constitution or the organization shall be grounds for removal charges against any of the elected officers.
1.2 The general membership shall vote on the removal resolution.
1.2 Removal shall be accomplished by a 2/3 majority of those members present.
1.4 Removal proceedings may be initiated by any voting member.

Section 2. Succession

2.1 In the event of removal, resignation, or vacancy of any elected officer, a special election shall be held to fill that position.

ARTICLE V
Finances

Section 1. Dues will be collected from each member at the beginning of each fall semester.
Section 2. The purpose of said dues shall be to provide funding for the sponsoring of events, programming, promotions of the organization, and social activities.

ARTICLE VI
Amendments

Section 1. Any amendment to this constitution must be approved by a 2/3 majority vote of those members present and voting.

1.1 Any amendment must be approved by the Student Government Association.
APPENDIX B

PETITION TO SEEK RECOGNITION

We, the undersigned, in order that the _______________________________ may seek recognition from Student Government Association do lend our names and ID numbers to this petition.

Contact Person _________________________________ Phone _______________

1. _________________________________________________________________
2. _________________________________________________________________
3. _________________________________________________________________
4. _________________________________________________________________
5. _________________________________________________________________
6. _________________________________________________________________
7. _________________________________________________________________
8. _________________________________________________________________
9. _________________________________________________________________
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11. ________________________________________________________________
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13. ________________________________________________________________
14. ________________________________________________________________
15. ________________________________________________________________
16. ________________________________________________________________
17. ________________________________________________________________
18. ________________________________________________________________
19. ________________________________________________________________
20. ________________________________________________________________

As a faculty/staff member of St. Ambrose University, I agree to sponsor the above named organization.

Printed Name ________________________ Signature ____________________________
ST. AMBROSE UNIVERSITY
STUDENT ORGANIZATION INFORMATION UPDATE SHEET

Campus Organization __________________________________________

Month of Organization Election(s) ________________________________

Your organization is best categorized as (choose one)

_____ Academic & Professional: Pertaining to an academic field.
_____ Cultural: pertaining to a sub-culture
_____ Honor Society: Special membership requirements.
_____ Recreational: Providing recreational opportunities and not a varsity sport.
_____ Service & Advocacy: Contributes to service needs of SAU and/or the greater community.
_____ Special Interest: Pertaining to an organization not affiliated with certain department.

Officer Information Update:

Number of Total Members ________________

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<th></th>
<th>Local Address</th>
<th>Local Phone #</th>
<th>E-mail address</th>
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<td>President</td>
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<td>Council Representative</td>
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Advisor: ___________________________  Department: ___________________________

Office Location: _____________________  Phone #: ____________________________
Please write a brief narrative for the student organization directory describing your organization to potential members.

Annual Events:

Campus organizations wishing to maintain recognition status and student organization directory mailing and referral information must fully complete the previous information.

Please return to:
Department of Student Activities
1st Floor Rogalski Center
studentactivities@sau.edu