

# Student Government Association

## Club Office Space Application/ Re-application 2012

***All applications must be submitted to OSLA (Office of Student Leadership and Activities), Room 260 Student Center by Thursday April 5<sup>th</sup> at 5pm. Completed applications must include this information sheet, all open-ended questions typed and attached, and the updated version of your Club's Constitution. It is recommended that a member of the club's E-board fill out this application.***

*Questions? Email [sga\\_clubrelations@pride.hofstra.edu](mailto:sga_clubrelations@pride.hofstra.edu).*

Club Name: \_\_\_\_\_ Club Email: \_\_\_\_\_

# of E-board Members: \_\_\_\_\_

# of Total Members in club (as of Spring 2012): \_\_\_\_\_

*\*All rosters will be checked on Collegiate Link so ensure Collegiate Link is up-to-date\**

Applicant Contact Name: \_\_\_\_\_

Cell Phone #: \_\_\_\_\_

Preferred Email: \_\_\_\_\_

Club Category: (Circle the category of your club)

Academic

Politically/Socially Active

Fraternity & Sorority

Pre-Professional

Media

Religious

Multicultural

Social

Performance

Sports

Do you currently have an office space? \_\_\_\_\_ If so, where? \_\_\_\_\_

- 1) Purpose/Mission of Club:
- 2) Why do you require an office space? How will/ have you been using this space?
- 3) Explain how an office space will enhance your ability to achieve your mission?
- 4) What supplies would you hope to have in an office space? (i.e. Desk space, etc.)
- 5) What events/ programs have you hosted in the past, and how has your organization's presence benefited the greater Hofstra community?
- 6) Please attach a mock schedule of a typical week of office use.

7) If you are currently sharing an office space with another club, who is it with and would you like to continue sharing with them? Why or Why not?

**\* Due to limited availability, by signing and submitting this application your organization understands and is willing to share an office space.**

**\*\* If granted an office space, your organization understands that SGA reserves the right to determine where your club will be placed amongst the available spaces.**

**\*\*\* By signing, I assure that the above information is accurate. I understand all policies and procedures related to the use of the Student Government Association office space and will abide by them at all times. A copy of the office space policies and guidelines is attached to this application, and is available in the SGA Office (Room 207). Failure to comply with any and all policies regarding office space may result in loss of office space and/or possible budget fines.**

(Please Print Name): \_\_\_\_\_

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

(Please Print Name): \_\_\_\_\_

Signature of Club President: \_\_\_\_\_ Date: \_\_\_\_\_

(Please Print Name): \_\_\_\_\_

Signature of Club Vice President: \_\_\_\_\_ Date: \_\_\_\_\_

(Please Print Name): \_\_\_\_\_

Signature of Club Faculty/Staff Advisor: \_\_\_\_\_ Date: \_\_\_\_\_

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*For OSLA use only:*

Received By: \_\_\_\_\_ Date: \_\_\_\_\_

*For SGA use only:*

Space approved: \_\_\_\_\_ Location: \_\_\_\_\_

Notes:

Space not approved: \_\_\_\_\_ Reasoning: \_\_\_\_\_

Notes: