



## Club/Organization Annual Report Packet

**EXISTING CLUBS/ORGANIZATIONS:** Please complete the items on this checklist and all required forms at the end of each academic year, but **no later than September 1 of the new year.**

- Re-familiarize yourself with **Columbia State Policy Number 03:01:00: *Student Organizations and Clubs***. The policy can be accessed [here](#).
- Complete the Annual Report Packet
  - Year-End Financial Report (attached)
  - Activity Report (attached)
  - NEW registration form to register your club for next year (with roster of members) (attached)  
*You MUST register every year in order for your club to remain active!*
- Attach an updated Constitution or Statement of Purpose, if applicable  
*If you need a copy of your previously submitted constitution/purpose statement, please contact student services.*

*Please report any broken links to [sga@columbiastate.edu](mailto:sga@columbiastate.edu).  
All of these forms can be found separately on the Student Organization website.*

***What happens if my organization doesn't submit this?*** Failure to complete the required packet by September 1 may result in NON-RECOGNITION status for your organization for the next academic year, meaning your group cannot request funds, host events or meetings on campus, hold fundraisers, hand flyers/advertise, etc.

**TO BE SIGNED AND SUBMITTED AT THE END OF EACH YEAR.**

I have reviewed the contents of this packet and ensure all to be accurate to the best of my knowledge.  
I have completed a new registration form, if applicable.

Club/Organization Name: \_\_\_\_\_

Sponsor: \_\_\_\_\_ Date: \_\_\_\_\_

President (or other student designee): \_\_\_\_\_ Date: \_\_\_\_\_



## Club/Organization Year-End Financial Report

Registered student organizations must complete this report at the conclusion of the academic year. Reports are due no later than September 1 of the new academic year. Please return to the office of Student Enrollment, Engagement, and Services (JSC 147) or to [SGA@ColumbiaState.edu](mailto:SGA@ColumbiaState.edu).

*\*Note: All expenditures must be transmitted through a club account in the business office. Use of other cash funds or outside bank accounts is prohibited.*

Name of Organization: \_\_\_\_\_

Fiscal year beginning July 1, 20\_\_\_\_ and ending June 30, 20\_\_\_\_.

- Please check here if you do NOT have a club account and did not handle ANY funds during the registration period. Skip to signature section.

**Beginning Balance:** \$ \_\_\_\_\_

**Organization Income** (itemize each source of income):

\_\_\_\_\_ \$ \_\_\_\_\_  
 \_\_\_\_\_ \$ \_\_\_\_\_  
 \_\_\_\_\_ \$ \_\_\_\_\_  
 \_\_\_\_\_ \$ \_\_\_\_\_  
 \_\_\_\_\_ \$ \_\_\_\_\_

Total Income for Year: \$ \_\_\_\_\_

**Expenses** (itemize each expense; use separate sheet if needed):

\_\_\_\_\_ \$ \_\_\_\_\_  
 \_\_\_\_\_ \$ \_\_\_\_\_  
 \_\_\_\_\_ \$ \_\_\_\_\_  
 \_\_\_\_\_ \$ \_\_\_\_\_  
 \_\_\_\_\_ \$ \_\_\_\_\_

Total Expenses for Year: \$ \_\_\_\_\_

**Ending Balance:** \$ \_\_\_\_\_

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
 Signature of Organization President/Treasurer Date

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
 Signature of Advisor Date

For Office Use Only: RECEIVED ON: \_\_\_\_\_ INITIALS: \_\_\_\_\_



## Club/Organization Activity Report

**Name of Organization:** \_\_\_\_\_

**Current number of Active Members:** \_\_\_\_\_ **Organization Level:** I II

**Next semester's President (Level I) or student point of contact (Level II) information:**

**Name:** \_\_\_\_\_

**Email:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

Please list additional officers' names and information, if applicable:

Position	Name	Email Address

Did you edit your organization's constitution or purpose statement this past year? Yes No

*\*If yes, please attach updated copy or email to [SGA@ColumbiaState.edu](mailto:SGA@ColumbiaState.edu)*

Please briefly describe any events or activities that your organization has been involved with this year. Include dates, location, and purpose (attached additional sheet if needed):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Current Advisors:**

*\*Please have new advisors complete an advisory support statement and include with this packet.*

Name	Title	Email

**Person completing this form:** \_\_\_\_\_

**Email:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

For Office Use Only:

RECEIVED ON: \_\_\_\_\_ INITIALS: \_\_\_\_\_

**STUDENT ORGANIZATION APPLICATION FOR REGISTRATION**

Name of Organization \_\_\_\_\_

Date: \_\_\_\_\_ Registration Period: \_\_\_\_\_

Registration Status: (Select one) Level I \_\_\_\_\_ Level II \_\_\_\_\_

**Applicants must attach appropriate documentation required for the registration status chosen. See Columbia State Policy Number 03:01:00: *Student Organizations and Clubs* for more information.**

STATEMENT OF CERTIFICATION

“In seeking registration, the above named organization certifies that it will comply with all applicable rules, policies, regulations, and procedures of the Tennessee Board of Regents and Columbia State Community College and with all federal, state, and local laws and regulations.”

Print Name	Student ID Number	Signature

Attach additional sheet if necessary.

Columbia State Employee Sponsor(s):

\_\_\_\_\_

***For Office Use Only***

Registration: Approved \_\_\_\_\_ Approved with Conditions \_\_\_\_\_ Disapproved \_\_\_\_\_ Date \_\_\_\_\_

Terms of Conditions: \_\_\_\_\_

\_\_\_\_\_

Signed: \_\_\_\_\_

Director of Student Engagement & Services