Fall 2015 - Spring 2016
UAF Recognized Student Organizations Account Signers Form

Student Organization Name: _________________________________________________________________

Account Number: ___ ___ ___ ___ ___ ___ – 41124

Please designate at least two (2) individuals to approve expenses for this account. Please print clearly in pen.

Name: ___________________________ Email: ___________________________

Title: _______________ Phone #:____________ Signature: ___________________________ Date: __/__/__

Name: ___________________________ Email: ___________________________

Title: _______________ Phone #:____________ Signature: ___________________________ Date: __/__/__

Name: ___________________________ Email: ___________________________

Title: _______________ Phone #:____________ Signature: ___________________________ Date: __/__/__

Name: ___________________________ Email: ___________________________

Title: _______________ Phone #:____________ Signature: ___________________________ Date: __/__/__

UAF Advisor
All UAF recognized clubs are required to have a staff or faculty advisor. A signature and contact information is required.

Name: ___________________________ Email: ___________________________

Title: _______________ Phone #:____________ Office Location: ___________________________

Signature: ___________________________ Date: ___/___/___

Please return to the Assistant Coordinator for Student Organizations in the Wood Center.

Name (LIVE Staff Only): ___________________________ Title: __________________

Signature: ___________________________ Date: ___/___/___

Please contact Josh Hovis at 474-1959 for more information regarding student organizations and policies, or Lexi Bystedt at 474-5755 regarding account information.