



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

Current Term:  Fall  Spring  Summer Year: \_\_\_\_\_

Type of Registration:  New  Renewal  Reactivation

### Joint Student Organization Application

While all student organizations are open to members of both Florida State University Panama City and Gulf Coast State College, applying as an official joint organization through this application offers many benefits. For more information about the advantages and responsibilities of a joint organization formed under the Seminole-Commodore Alliance, see the SCA Student Organization Handbook.

The organization’s registration status will be approved only when all required documents have been submitted in completion to both FSU Panama City and GCSC and a confirmation email has been received by the organization. Include all of the following items, printed and signed as appropriate, and turn in to 6 campus’s student governments:

- Organization Application
- Constitution
- SGA Membership Application  
<https://www.gulfcoast.edu/campus-life/clubs-organizations/forms/sgamembershipapp1819.html>

The information recorded in the application packet must be accurate and current. Any changes in the status of the organization as written on this form must be reported to both student governments.

**FSU Panama City  
 Student Government Council**  
 Barron Building 309  
 850-770-2194  
 sgc@pc.fsu.edu

**Gulf Coast State College  
 Student Government Association**  
 SUE Cafeteria  
 850-769-1551 ext. 3598  
 sga@gulfcoast.edu

### Organization Information

Type of Organization (select one):

- |                                    |                                       |   |
|------------------------------------|---------------------------------------|---|
| <input type="checkbox"/> Academic  | <input type="checkbox"/> Leadership   | <input type="checkbox"/> Social           |
| <input type="checkbox"/> Cultural  | <input type="checkbox"/> Professional | <input type="checkbox"/> Special Interest |
| <input type="checkbox"/> Fraternal | <input type="checkbox"/> Recreational | <input type="checkbox"/> Spiritual        |
| <input type="checkbox"/> Honorary  | <input type="checkbox"/> Service      | <input type="checkbox"/> Other: _____     |

Affiliation:  Campus  Local  State  National

Provide a brief description of the organization’s mission:

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# SEMINOLE-COMMODORE ALLIANCE

## Mission

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## Meetings

When does the organization host meetings?

Day: \_\_\_\_\_ Time: \_\_\_\_\_

Location: \_\_\_\_\_ Date of First Meeting: \_\_\_\_\_

Frequency:  Weekly  Bi-weekly  Monthly  Other: \_\_\_\_\_

## Advisors

### FSU Panama City

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

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

I have read and agree to abide by the university's policies and procedures. Additionally, as a joint organization advisor, I have read the handbook and agree to abide by the policies.

\_\_\_\_\_  
Signature Date

### Gulf Coast State College

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

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

I have read and agree to abide by the university's policies and procedures. Additionally, as a joint organization advisor, I have read the handbook and agree to abide by the policies.

\_\_\_\_\_  
Signature Date

## Officers

### President

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

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

Institution:  FSU Panama City  GCSC Student ID: \_\_\_\_\_

I have read and agree to abide by the university's policies and procedures. Additionally, as a joint organization officer, I have read the handbook and agree to abide by the policies.

\_\_\_\_\_  
Signature Date

# SEMINOLE-COMMODORE ALLIANCE

## Officers (continued)

### Vice President

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

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

Institution:  FSU Panama City  GCSC Student ID: \_\_\_\_\_

I have read and agree to abide by the university's policies and procedures. Additionally, as a joint organization officer, I have read the handbook and agree to abide by the policies.

\_\_\_\_\_  
Signature Date

### Treasurer

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

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

Institution:  FSU Panama City  GCSC Student ID: \_\_\_\_\_

I have read and agree to abide by the university's policies and procedures. Additionally, as a joint organization officer, I have read the handbook and agree to abide by the policies.

\_\_\_\_\_  
Signature Date

Other: \_\_\_\_\_

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

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

Institution:  FSU Panama City  GCSC Student ID: \_\_\_\_\_

I have read and agree to abide by the university's policies and procedures. Additionally, as a joint organization officer, I have read the handbook and agree to abide by the policies.

\_\_\_\_\_  
Signature Date

Other: \_\_\_\_\_

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

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

Institution:  FSU Panama City  GCSC Student ID: \_\_\_\_\_

I have read and agree to abide by the university's policies and procedures. Additionally, as a joint organization officer, I have read the handbook and agree to abide by the policies.

\_\_\_\_\_  
Signature Date

## Committees

Please list any committees within the organization:

\_\_\_\_\_

# SEMINOLE-COMMODORE ALLIANCE

## Members

By signing this form, all members agree to abide by the policies and procedures for membership outlined by their institution as well as those outlined by the handbook.

- 1** Name: \_\_\_\_\_ Signature: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
Institution:     FSU Panama City     GCSC    Student ID: \_\_\_\_\_
- 2** Name: \_\_\_\_\_ Signature: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
Institution:     FSU Panama City     GCSC    Student ID: \_\_\_\_\_
- 3** Name: \_\_\_\_\_ Signature: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
Institution:     FSU Panama City     GCSC    Student ID: \_\_\_\_\_
- 4** Name: \_\_\_\_\_ Signature: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
Institution:     FSU Panama City     GCSC    Student ID: \_\_\_\_\_
- 5** Name: \_\_\_\_\_ Signature: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
Institution:     FSU Panama City     GCSC    Student ID: \_\_\_\_\_
- 6** Name: \_\_\_\_\_ Signature: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
Institution:     FSU Panama City     GCSC    Student ID: \_\_\_\_\_
- 7** Name: \_\_\_\_\_ Signature: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
Institution:     FSU Panama City     GCSC    Student ID: \_\_\_\_\_
- 8** Name: \_\_\_\_\_ Signature: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
Institution:     FSU Panama City     GCSC    Student ID: \_\_\_\_\_
- 9** Name: \_\_\_\_\_ Signature: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
Institution:     FSU Panama City     GCSC    Student ID: \_\_\_\_\_
- 10** Name: \_\_\_\_\_ Signature: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
Institution:     FSU Panama City     GCSC    Student ID: \_\_\_\_\_

# SEMINOLE-COMMODORE ALLIANCE

## Members

By signing this form, all members agree to abide by the policies and procedures for membership outlined by their institution as well as those outlined by the handbook.

11 Name: \_\_\_\_\_ Signature: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
Institution:  FSU Panama City  GCSC Student ID: \_\_\_\_\_

12 Name: \_\_\_\_\_ Signature: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
Institution:  FSU Panama City  GCSC Student ID: \_\_\_\_\_

13 Name: \_\_\_\_\_ Signature: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
Institution:  FSU Panama City  GCSC Student ID: \_\_\_\_\_

14 Name: \_\_\_\_\_ Signature: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
Institution:  FSU Panama City  GCSC Student ID: \_\_\_\_\_

15 Name: \_\_\_\_\_ Signature: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
Institution:  FSU Panama City  GCSC Student ID: \_\_\_\_\_

16 Name: \_\_\_\_\_ Signature: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
Institution:  FSU Panama City  GCSC Student ID: \_\_\_\_\_

17 Name: \_\_\_\_\_ Signature: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
Institution:  FSU Panama City  GCSC Student ID: \_\_\_\_\_

18 Name: \_\_\_\_\_ Signature: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
Institution:  FSU Panama City  GCSC Student ID: \_\_\_\_\_

19 Name: \_\_\_\_\_ Signature: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
Institution:  FSU Panama City  GCSC Student ID: \_\_\_\_\_

20 Name: \_\_\_\_\_ Signature: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
Institution:  FSU Panama City  GCSC Student ID: \_\_\_\_\_

# SEMINOLE-COMMODORE ALLIANCE

## Projected Budget

### Revenue

| Source | Description | Allocation |
|--------|-------------|------------|
|        |             |            |
|        |             |            |
|        |             |            |
|        |             |            |
|        |             |            |
|        |             |            |
| Total: |             |            |

### Expenses

| Paid By (Revenue Source): | Description | Cost |
|---------------------------|-------------|------|
|                           |             |      |
|                           |             |      |
|                           |             |      |
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|                           |             |      |
|                           |             |      |
| Total:                    |             |      |

*Any funding requests for the Student Activities Board Alliance (SABA) and/or the FSU Panama City Student Government Council must be made separate from this application.*