

# **CAMPUS CIVITAN CLUB REQUEST FOR ORGANIZATIONAL AUTHORITY**

This form should be sent to the Campus Coordinator at Civitan International and a copy sent to the district governor immediately after the first meeting of the new club-in-progress (provided you have five or more joining). Civitan International will send letters to each of the new members listed on the form. **Please type or print.**

For the organization of the \_\_\_\_\_ Civitan Club

City \_\_\_\_\_ State/Province \_\_\_\_\_

Sponsored by the \_\_\_\_\_ Civitan Club

of the \_\_\_\_\_ District

Approximate enrollment of the college or university: \_\_\_\_\_

Is this a two-year or four-year school? \_\_\_\_\_ Is the school on quarters or semesters? \_\_\_\_\_

List the other established service and civic clubs at the school: \_\_\_\_\_

How many pre-charter meetings have been held to date? (A pre-charter meeting is a meeting in which the program, purposes and principles of Civitan have been discussed.) \_\_\_\_\_

If this *Request for Organizational Authority* is approved, where and when will the subsequent meetings of this Campus Civitan group be held? \_\_\_\_\_

What is the target date for chartering of this new club? \_\_\_\_\_

What civic activities and service projects could this new club undertake at an early date following charter? \_\_\_\_\_

Acting in the belief that a Campus Civitan club would be in the best interest of the school described above, we, as representative students, request from Civitan International the authority to establish a Campus Civitan club here in accordance with your established requirements, to which end we pledge our active support.

Name: \_\_\_\_\_ Initiation Fee & Annual Dues Collected?

Address: \_\_\_\_\_  Yes  No

City/State Province/Postal Code: \_\_\_\_\_

Daytime Telephone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ E-mail: \_\_\_\_\_

Name: \_\_\_\_\_ Initiation Fee & Annual Dues Collected?

Address: \_\_\_\_\_  Yes  No

City/State Province/Postal Code: \_\_\_\_\_

Daytime Telephone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ E-mail: \_\_\_\_\_

Name: \_\_\_\_\_ Initiation Fee & Annual Dues Collected?  
Address: \_\_\_\_\_  Yes  No  
City/State Province/Postal Code: \_\_\_\_\_  
Daytime Telephone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ E-mail: \_\_\_\_\_

Name: \_\_\_\_\_ Initiation Fee & Annual Dues Collected?  
Address: \_\_\_\_\_  Yes  No  
City/State Province/Postal Code: \_\_\_\_\_  
Daytime Telephone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ E-mail: \_\_\_\_\_

Name: \_\_\_\_\_ Initiation Fee & Annual Dues Collected?  
Address: \_\_\_\_\_  Yes  No  
City/State Province/Postal Code: \_\_\_\_\_  
Daytime Telephone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ E-mail: \_\_\_\_\_



Approved: \_\_\_\_\_ Date  
District Civitan Governor  
Approved: \_\_\_\_\_ Date  
District Campus Civitan Chair  
Approved: \_\_\_\_\_ Date  
President of Sponsoring Club(s)  
Approved: \_\_\_\_\_ Date  
Civitan International



The club builders for this new Civitan Club will be:

1. \_\_\_\_\_ Club  
Name/Address
2. \_\_\_\_\_ Club  
Name/Address
3. \_\_\_\_\_ Club  
Name/Address



Mail completed form to:  
Civitan International  
Campus Coordinator  
P. O. Box 130744  
Birmingham, AL 35213-0744