

SUNY MORRISVILLE
Student Government Organization
Advisor Roster

Date:

Club/Organization Name:

Advisor(s):

Name: _____

Office Phone: _____

Signature: _____

Name: _____

Office Phone: _____

Signature: _____

Name: _____

Office Phone: _____

Signature: _____

The advisor(s) who sign this form are naming themselves as advisor(s) of the above listed club or organization. Once this form is completed additional Advisor Rosters will not need to be completed each semester. If a change is made to the roster a new roster must be submitted. To resign as advisor(s) from a club or organization a resignation must be submitted in writing to the Student Activities Office. This form will be kept on file in the Student Activities Office.