



Recognized Student Organization
Advisor Approval Form

Today's Date: _____

Information
Advisor Name (printed):
Department:
Work Address:
Work Phone:
Work Email:
Supervisor's Name:
Student Organization Name*:

*If you are a new advisor for multiple organizations, individual forms must be submitted

Important Notice

As a student organization advisor, you are designated as a Campus Security Authority (CSA). Please review the information regarding the roles and responsibilities of a CSA and complete the Clery Act training which can be found online at

<https://studentaffairs.psu.edu/involvement-student-life/student-organizations/advisor-resources/clery-act>.

By signing below on the Advisor line, I am agreeing to serve as the Advisor to the student organization listed above at The Pennsylvania State University's University Park campus and recognize, understand, and accept the responsibilities, policies and procedures as outlined in the student organization's constitution, the Advisor Manual, and Policies and Rules for Student Organizations. Additionally, I understand that my supervisor must sign below informing them about my role as an advisor. I will carry out these duties, policies, and procedures to the best of my ability.

Required Signatures (for approval):

Advisor Signature: _____ Date: _____

Advisor's Supervisor Signature: _____ Date: _____

*Retain a copy for your records
Upload to New Org Request /or/ Advisor Change Request Form*