

XAVIER UNIVERSITY OF LOUISIANA
Office of Campus
Activities/Program Evaluations

Academic Semester: _____

Organization _____ Chapter _____

List organization activities/programs

Campus Events	Community Service Events	Fundraising Events

List goals achieved

Describe any difficulties, problems, or unusual circumstances encountered.

Submitted by: _____ Date: _____

President: _____ Date: _____

Advisor: _____ Date: _____

XAVIER UNIVERSITY OF LOUISIANA
Office of Campus Activities
Officers Registration

Academic Year: _____

Organization _____ **Chapter** _____

Organization Email _____

President _____ Cell Phone _____

XULA email _____ alternate email _____

Vice President _____ Cell Phone _____

XULA email _____ alternate email _____

Secretary _____ Cell Phone _____

XULA email _____ alternate email _____

Treasurer _____ Cell Phone _____

XULA email _____ alternate email _____

Primary Advisor _____

Phone _____ Email _____

Secondary Advisor _____

Phone _____ Email _____

I certify that the above officers were elected in accordance with our Constitution and the University Regulations and registered with the Office of Student Services in accordance with I.O.C. and University Regulations.

Secretary _____ Date _____

Advisor _____ Date _____

XAVIER UNIVERSITY OF LOUISIANA
Office of Campus Activities
Community Service Report

Organization _____

1. Please list the dates and a brief description of the community service your organization completed this semester.

Date	Agency	Description	Number of Students Participating	Hours in Service

Answer the following questions on a separate sheet of paper.

2. Please select one or two community service events (from above) that you consider to be the most important of the entire semester and explain the significance and impact on the community. Be as specific as possible.
3. Please explain why your organization is exemplary at Xavier for service, in accordance to the mission statement. What unique assets does your organization bring and/or have to offer to the community that set it apart from other organizations?

I hereby certify that the above information is correct to the best of my knowledge. I understand that any falsifications of the document will result in automatic disqualification and ineligibility for Student Government Allotments Services to this organization and any Student Service Awards, University Awards and/or other recognition relating to service for the next determined academic term.

Submitted by _____ Date _____

President _____ Date _____

Advisor _____ Date _____

XAVIER UNIVERSITY OF LOUISIANA
Office of Campus Activities
Financial Report

Organization _____
Financial Institution _____

PLEASE ATTACH A COPY OF YOUR MOST RECENT BANK STATEMENT

Revenues

Due Collected \$ _____
Other _____ \$ _____ TOTAL REVENUES \$ _____

Expenditures

Memberships \$ _____
Donations \$ _____
Supplies \$ _____
Social /Activities \$ _____ TOTAL EXPENDITURES \$ _____
PROFITS \$ _____

Please list contact person(s) on the Account:

Name: _____ Phone: _____ Email: _____

Name: _____ Phone: _____ Email: _____

Budget for Semester

Event	Purpose of Event	Allocation from Congress (if received)	Amount Spent

Fundraiser

Title of fundraiser	Purpose	Amount Raised

I certify that the above Financial Report is complete and accurate. Organization packet is incomplete unless copy of Financial Document is attached.

Treasurer _____ Date _____

Advisor _____ Date _____

XAVIER UNIVERSITY OF LOUISIANA
Office of Campus Activities
Organization Member Roster

Organization _____ Chapter _____

Name	Student Number	Active (Y/N)
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		
11		
12		
13		
14		
15		
16		
17		
18		
19		
20		
21		
22		
23		
24		
25		

Secretary _____ Date _____

President _____ Date _____

Advisor _____ Date _____

XAVIER UNIVERSITY OF LOUISIANA
Office of Campus Activities
Organization Proposed Semester Activities

Academic Semester: _____

Community Service Activities

Date	Time	Location	Activity

Social Activities

Date	Time	Location	Activity

Fund Raising Activities

Date	Time	Location	Activity

General Activities

Date	Time	Location	Activity