Student Organization Account Form
Student Involvement
Trinity University

This form is used to apply for a student organization account OR to change authorized access to a current student organization account on campus. Authorizations for access should be completed annually or when there are any changes relating to access. Only student members of active student organizations should have access to an organization’s funds.

Select the semester(s) to which this agreement applies: Fall Spring Calendar Year

Name of Student Organization: ____________________________ Full Name as Registered with Trinity University

Account Number: ______________________________________

Which categories apply to your student organization? University Sponsored □ New Organization □ Registered □ Existing Organization □ Fraternity/Sorority □ Campus Publications □

By signature, only the people listed below are authorized to access this account. Authorization allows access to the account including, but not limited to, check writing, cash withdrawals, deposit of funds, and account balance.

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<th>Signature</th>
<th>Position</th>
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Signature(s) Required for Approval:

Primary Advisor Signature Email Address Date
(Signature is required for organizations that have an advisor)

Student Involvement representative Date

Student Involvement ● Coates University Center, West Wing ● (210) 999-7547 ● getinvolved@trinity.edu

Updated 9.23.15