



FORM 01

APPLICATION FOR RECOGNITION

DATE: \_\_\_\_\_

1. NAME OF THE ORGANIZATION:

\_\_\_\_\_
 OLD/ NEW

2. TYPE OF ORGANIZATION:

Co – Curricular  Extra – Curricular  Special Interest Group  Cultural Group

3. RECOMMENDED ADVISER/ COACH:

- 1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

4. BRIEF DESCRIPTION OF THE ORGANIZATION:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

APPLICATION FOR RECOGNITION MUST BE SUBMITTED WITH THE FOLLOWING DOCUMENTS:

- RECOMMENDED FACULTY ADVISER [at least three (3)]. Preferably full time faculty.
 LOGO OF THE ORGANIZATION
 CONSTITUTION AND BY – LAWS. Duly ratified by the forming members.
 LIST OF OFFICERS WITH THEIR RESPECTIVE PERSONAL DATA SHEET.
 LIST OF MEMBERS [at least (50) members in total]
 OPERATIONAL PLAN FOR THE SCHOOL YEAR. The objective of the operational plan must be aligned with the objectives of the Office of Student Welfare and Development.

Submitted by:

Recommending Approval:

\_\_\_\_\_  
PRESIDENT / Date

\_\_\_\_\_  
DIRECTOR, OSWD / Date

Noted by: (For Co-Curricular Organizations)

\_\_\_\_\_  
COLLEGE DEAN / Date

Note: All required documents must be attached otherwise this application will not be processed.