Student Organization Activity Request Form CHECK-LIST

*Form and any other necessary documents MUST be turned in AT LEAST two (2) weeks

BEFORE the activity is to be conducted!*

X	Required Items	
	ALL necessary information is completed on the form.	
	All participating Committee Members have signed the form.	
	All participating Advisors have signed the form.	
	Signed Student Organization MINUTES authorizing this Activity are attached.	
	Activity Request Form has been Approved and SIGNED by a COPSA Officer.	
	BEFORE posting, any flyer promoting the activity has been approved by:	
	1) the Communications & Promotions Assistant Director Call 671-735-5516 ext. 5638	
	or <u>email—gcc.pio@guamcc.edu</u> ; <u>AND</u>	
	2) the Center for Student Involvement; OR	
	3) the Student Support Services Office Call 671-735-5555 or proceed to room C-1	
	Any contract that is required to conduct this activity can ONLY be signed by the GCC President and is attached.	
	Press Release (if applicable) promoting activity has been approved by the Communications & Promotions Assistant Directo	
	Liability Waiver Forms have been submitted for ALL STUDENTS participating in ANY off-campus approved activity.	
X	<u>Using campus space?</u>	
	Environmental Health & Safety Officer has approved activity request and signed form. (Call 671-788-2223)	
	The Student Support Services Office has confirmed space request. Attach a Room Utilization Request email/document	
	from Student Support Services indicating room reservation and approval for use of campus space.	
	Please Note: ONLY Advisors may make room reservations.	
X	Having a large scale activity or formal event?	
	Submit an Invitation/Program/Agenda for the event AND a Written Script for the MC to use throughout the event for	
	approval by the CSI and the Dean of the School of Technology & Student Services.	
	(These MUST be APPROVED AT LEAST 4 weeks BEFORE the event)	
	Invite pertinent VIP guests ONLY AFTER approval of your event.	
	(Distribute invitations AT LEAST 2 weeks BEFORE the event)	
	Using campus space outside of college operational hours OR for an activity that will involve a	
X	I large number of people? Security required!	
	Environmental Health & Safety Officer has approved activity request and signed form. (Call 671-788-2223)	
	The Student Support Services Office has approved space request and arranged for additional security. Attach	
	necessary documents (Call 671-735-5555)	
	Any additional Security costs required will be paid by the student organization	
X	Traveling?	
	Information for off-island travel must be submitted at least four to six (4-6) months prior to travel for PRE-APPROVAL.	
	Activity Request Form must detail purpose of trip and relevance for student organization members/advisors to travel.	

The Center for Student Involvement must be notified If an activity is cancelled.

All <u>applicable</u> items <u>MUST</u> be completed <u>BEFORE</u> turning in the Activity Request Form to the Center for Student Involvement. Call the Center for Student Involvement at 671-735-8887 ext. 5518/9, should you need more information.

For promotional & liability purposes, a student organization MAY NOT PROCEED with their activity UNTIL AFTER THEIR ACTIVITY

HAS BEEN FORMALLY APPROVED by the Center for Student Involvement AND the Dean of Student Services.

Additionally, Liability Waiver forms MUST be submitted for ALL STUDENTS participating in ANY off-campus approved activity.



Student Organization Activity Request FORM

Student Organization:	Date of Request:		
Proposed Date of Activity:	Time: From: To:		
Type of Activity:	ndraiser Recreational Travel		
	ame of Activity: Location:		
Brief Description:			
Purpose of Activity:			
	mbers GCC Community General Public Guest List		
Will you be collaborating with another student organization			
	Contact Person:		
On-Campus location to be reserved? YES			
STEP 1: Obtain SAFETY approval	STEP 2: Obtain LOCATION approval		
Indicate use of: ☐ Tents/Canopies ☐ Electrical/Gas Appliances or Equipment	Location to be reserved:		
Open Flames			
Describe activity setup:	Time to reserve location: From: To:		
	From: To:		
Environmental Health & Safety Office	Does activity involve use of amplified sound? Yes No		
Tel: 671-788-2223 Location: Bldg. 2000, 2nd Flr., Room 2219 SIGNATURE & DATE: ☐ Approved ☐ Disapproved	Student Support Services Office Tel: 671-735-5555 Location: C-1		
SIGNATURE & DATE:	Room Utilization Request Confirmed: Yes No		
Environmental Health & Safety Officer	Date Confirmed: Documentation Attached		
Activity Committee Members (Print Name) Signature			
1.	Signature		
2.			
3.			
Advisors* (Print Name)	Signature		
1. 2.			
3.			
*At least one (1) Advisor is REQUIRED to attend	l, chaperone and be present for the entire duration of the activity.		
* * Signed Student Organization MINUTES authorizing this Activity MUST be attached to this Form! * *			
Council On Postsecondary Student Affairs (COPSA)			
COPSA OFFICER NAME COP	SA OFFICER SIGNATURE DATE		
GERALD A.B. CRUZ, Associate Dean DATE	MICHAEL L. CHAN, Ed.D., Dean DATE		
	School of Tachnology and Student Services		
School of Technology and Student Services	School of Technology and Student Services		
COMMENTS:	School of Technology and Student Services		

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