The purpose of the Student Organization Partnership is for student organizations to host events in concert with the Student Government Association. The student organization should have an event in mind that it wants to and partner with SGA in terms of planning, promoting, and executing the event. SGA is not a resource for funds. However, if you are in need of funding for your organization for an event, please be sure to go to Student Activity Fee Information or contact Jackie Victory, the Director of Student Organizations & Services, for more information.

Student Organization Information

Student Organization Name: ____________________________

Student Organization President’s Name: ____________________________
- President’s Email: ____________________________
- President’s Phone Number: ____________________________

Student Organization Vice President’s Name:
- Vice President Presiden’t Email: ____________________________
- Vice President President’s Phone Number: ____________________________

Activity/Event Idea

Title of Activity/Event: ____________________________

Date: ____________________________

Time: ____________________________

Location: ____________________________

Purpose of Event: ____________________________
Student Government Association Assistance

Select one or more: How will your organization need SGA’s assistance? (highlight/circle)

- Attendance
- Planning
- Promotion
- Executing
- Other

Please explain your selection above in 100-150 words. If you chose attendance, please point out the number of SGA members you are requesting to attend your event.

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In the event that __________ (Your Organization) does receive a partnership from the Student Government Association (SGA), I, __________, (Organization President’s Printed Name) understand that SGA is co-sponsor of this event and must include logo on all marketing materials. Also, I, __________, (Organization President’s Printed Name) understand that the SGA Executive Board has to vote on the approval of the partnership, and I __________ (Organization President’s Printed Name) must submit this form one month before the event to ensure that planning and promotion is properly executed. Additionally, I, __________, (Organization President’s Printed Name) am aware that SGA does not allocate funds to Student Organization; therefore, I am not requesting funds for the partnership event. Lastly, I, __________, (Organization President’s Printed Name) am knowledgeable that I will submit this document to STU 330, will email Madam President Powell at sga.president@mtsu.edu upon the completion of turning in this document, and schedule a time to meet with her to discuss the logistics of the proposed event.

Signature (Organization President): ________________________________