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**[CLUB NAME] Constitution**

*Fill in the fields in a normal font. Fill in fields as required*

*in accordance with club information. Amendments must be*

*included in the “Additional Committee Regulations” field.*

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| --- | --- | --- | --- |
| **Club Name:** | **Club President (2024-25):** | | **Renewal For Next Academic Year? (Yes/No):** |
| **Club Leader/President (2025-26 or NA):** | **Requested Budget For 2025-26:** | | **Current Director of Operations:** |
| **Email To Contact Club:** | | **Faculty/Staff Advisor:** | |
| **Meeting Frequency:** | | **Location (if applicable):** | |
| **Club Mission/Description:** | | | |
| **Plans For Both Semesters (meetings, events, etc.):** | | | |
| **What Will Your Club Use Requested Budget For:** | | | |
| **List Club Equipment Owned By Ambrose (Where is it Stored) & Social Media Accounts/Login Info:** | | | |
| **Grants Applied For, With Specifications (Or Let Us Know By Sept 15):** | | | |

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| **Club Positions 2025-26** |
| **Title: [PRESIDENT] (Required)**  **Duties and Responsibilities:** |
| **Title: [FINANCIAL OFFICER] (Required)**  **Duties and Responsibilities** |
| **Title: [POSITION 3] (Required)**  **Duties and Responsibilities** |
| **Title: [POSITION 4 or MEMBER]**  **Duties and Responsibilities** |
| **Title: [POSITION 5 or MEMBER]**  **Duties and Responsibilities** |

**Acknowledgment of Ambrose Student Council’s and Ambrose University’s Policies and Guidelines:**

By signing below, the Authoring Member of [CLUB NAME] \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, on behalf of the entire club, officially acknowledges and accepts that the club is aware of the Ambrose Student Council’s policies and standards as well as Ambrose University’s policies and standards. The signed below also acknowledges and accepts that failure to comply with these policies and standards will result in the termination of the club at the discretion of the Ambrose Student Council.

Club President Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Faculty or Staff Sponsor Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_

ASC President\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ASC Director of Operations Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ASC VP of Internal Affairs\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

VP of Student Life\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_