

Student Organization **Volunteer Co-Advisor Verification Form** CHECK-LIST

Form **MUST be completed at the beginning of each academic year
AND when new Volunteer Co-Advisors are added!**

Volunteer Co-Advisors cannot be listed as student organization Advisors of Record or render any decision on behalf of the College for activities related to the student organization. Volunteer Co-Advisors are not authorized to approve or sign any student organization document which requires an Advisor's signature.

X Required Items

- Form is signed by all Volunteer Co-Advisors.
- Form is signed by the Student Organization President **AND** one (1) additional Officer.
- Signed minutes indicating the Officers and Volunteer Co-Advisors of the student Organization is attached.

*All items above **MUST** be completed **BEFORE** turning in the Volunteer Co-Advisor Verification Form to the Center for Student Involvement.*

Call the Center for Student Involvement at 735-5518/9, should you need more information.



**Student Organization
VOLUNTEER CO-ADVISOR VERIFICATION FORM**

Date: _____

Academic Year: _____

Student Organization: _____

STUDENT ORGANIZATION VOLUNTEER CO-ADVISOR ACKNOWLEDGEMENT

By signing below, I hereby accept my position as a GCC student organization Volunteer Co-Advisor for this academic year and acknowledge that I have fully completed and submitted the GCC Volunteer Application Form, Employee Master Record, and a Processing Checklist to the GCC Human Resources Office pending approval certification.

Additionally, I understand that Volunteers Co-Advisors cannot be listed as student organization Advisors of Record or render any decision on behalf of the College for activities related to the student organization. Volunteer Co-Advisors are not authorized to approve or sign any student organization document which requires an Advisor's signature.

1. Student Organization Volunteer CO-ADVISOR:

_____ *Print Name*

_____ *Signature*

_____ *Date*

2. Student Organization Volunteer CO-ADVISOR:

_____ *Print Name*

_____ *Signature*

_____ *Date*

STUDENT ORGANIZATION OFFICER ACKNOWLEDGEMENT

By signing below, I verify the above individuals have been elected to serve as Volunteer Co-Advisors for our student organization.

Student Organization PRESIDENT

_____ *Print Name*

_____ *Signature*

_____ *Date*

Student Organization OFFICER: (Position/Title: _____)

_____ *Print Name*

_____ *Signature*

_____ *Date*

****Signed minutes indicating the Officers AND the elected Volunteer Co-Advisors of the student organization MUST be attached to this Form! ****

GCC Human Resources Office APPROVAL Certification

The above named Volunteer Co-Advisors have fully completed and submitted the GCC Volunteer Application form, the Employee Master Records form, a Processing Checklist to the GCC Human Resources Office and are hereby cleared to volunteer.

APOLLINE SAN NICOLAS, SHRM-CP
Chief Human Resources Officer

_____ **Date**

Authorizing Signatures

GERALD A. B. CRUZ, Associate Dean
School of Technology & Student Services

MICHAEL L. CHAN, Ed.D., Dean
School of Technology & Student Services