



CLASSIFIED CLUB ADVISOR REQUEST

Name: _____ Employee ID #: _____

College: _____ Department: _____

Academic Year: _____

Name of Club: _____

Club Meeting Dates and Times: _____

Other Planned Club Events: _____

Acknowledgement

- I acknowledge that classified employees may serve on a maximum of two college, district office, or district-wide committees (including their taskforces or subcommittees) or one committee and serve as one club advisor, and may serve on other committees with the approval of their immediate supervisor.
- I will be released from my regular assignment to act as club advisor for no more than four hours per month.
- I acknowledge that my supervisor must approve my voluntary assignment as club advisor based upon a satisfactory evaluation.

Employee Signature

Date

Supervisor Signature

Date

Director of Student Life Signature

Date

Vice President, Student Support Services Signature

Date

- THIS EMPLOYEE HAS BEEN TRAINED AND IS APPROVED TO SERVE AS A CLUB ADVISOR**

VOLUNTARY ACTIVITY PARTICIPATION FORM MUST BE ATTACHED TO THIS REQUEST