RF001-TRACKER FORM

This document shall serve as your student organization's requirement guide. Fill out all the necessary information being solicited for the processing of your application.

I. INFORMATION							
STUDENT ORGANIZATION CONTROL NUMBER (SOCN) Issued SOCN for the previous ANR Period							
COUNTY WE PROVIDED THAT I CHECK							
COMPLETE NAME OF STUDENT e.g., Association of Concerned Students (ACS)	ORGANIZATION (ABBREVIATION/INITIALISM)						
CLASSIFICATION OF JURISDICT Choose from these options:	TON						
Local Student Organization	University-Wide Student Organization						
otherwise, supply with University-Wide College of Accountancy and Finance CAF College of Architecture, Design, and Built Environment CADBE College of Arts and Letters CAL College of Business Administration CBA College of Business Administration CBC College of Computer and Information Sciences CCIS College of Education COED College of Engineering CE College of Human Kinetics CHK	Student Organization, choose from the options below, solution Student Organization. College of Law CL College of Political Science and Public Administration CPSPA College of Social Sciences and Development CSSD College of Science CS College of Tourism, Hospitality, and Transportation Management CTHTM Institute of Technology ITECH Open University System OUS Graduate School GS Senior High School SHS						
NATURE/TYPE OF STUDENT OR Choose from the options below. Choose	RGANIZATION se whatever is applicable separated by comma(s).						
Academic Organization Advocacy Organization Cultural/Arts/Dance Organization Fraternities and Sororities Political Organization	Religious Organization Scholars Organization Socio-civic Organization Special Interest Organization Sports Organization						
COMPLETE NAME OF STUDENT e.g., Instructor III Juan S. Dela Cruz	ORGANIZATION'S ADVISER(S)						



II. TABLE OF REQUIREMENTS

The table of requirements should only be accomplished by authorized representatives of PUP SC COSOA.

COMPLETE NAME OF STUDENT ORGANIZATION (ABBREVIATION/INITIALISM)

ciation of Concerned Students (ACS		, , , , , , , , ,	,

REQUIREMENTS	DATE	SIGNATURE
RD001		
Certificate of Recognition from Central/Local Student		
Council		
RD002		
Official List of Officers and Adviser(s) with signatures		
over printed names		
RD003		
Officers' Profile with 1st Semester Certificate of		
Registration/Confirmation Slip/Certificate of Enrollment		
RD004		
Adviser(s)'s Letter of Concurrence with scanned copy		
of their university-issued ID		
RD005		
Student Organization's Constitution and Bylaws (CBL)		
with emphasis on amendments (if any)		
RD006		
General Plan of Activities with Budgetary Outlay		
RD007		
Advocacy Plan		
RD008		
Accomplishment Report		
RD009		
Certificate of Clearance from PUP Student Council		
Commission on Audit (PUP SC COA)		
RD010		
Turnover of Assets and Funds		
RD011		
Waiver of Responsibility		

Remarks:	
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Date Finalized: Date Approved:

Approved by: