



# Polytechnic University of the Philippines

## STUDENT COUNCIL CONSTITUTIONAL COMMISSIONS

### Commission on Student Organizations and Accreditation

#### AF001-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

##### COMPLETE NAME OF STUDENT ORGANIZATION (ABBREVIATION/INITIALISM)

e.g., Association of Concerned Students (ACS)

##### CLASSIFICATION OF JURISDICTION

Choose from these options:

Local Student Organization

University-Wide Student Organization

##### SUB-CLASSIFICATION OF JURISDICTION

If you declared above as a Local Student Organization, choose from the options below, if otherwise, supply with University-Wide Student Organization.

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 Communication | COC  
College of Computer and Information Sciences | CCIS  
College of Education | COED  
College of Engineering | CE  
College of Human Kinetics | CHK

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 ORGANIZATION

Choose from the options below. Choose 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 ORGANIZATION'S ADVISER(S)

e.g., Instructor III Juan S. Dela Cruz



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## 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)

e.g., Association of Concerned Students (ACS)

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| REQUIREMENTS                                                                                                                                                            | DATE | SIGNATURE |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------|-----------|
| <b>AD001</b><br>Certificate of Recognition from Central/Local Student Council                                                                                           |      |           |
| <b>AD002</b><br>Official List of Officers, Members*, and Adviser(s) with signatures over printed names<br><i>*at least 15 members including the officers/executives</i> |      |           |
| <b>AD003</b><br>Officers' Profile with 1 <sup>st</sup> Semester Certificate of Registration/Confirmation Slip/Certificate of Enrollment                                 |      |           |
| <b>AD004</b><br>Adviser(s)'s Letter of Concurrence with scanned copy of their University-issued ID                                                                      |      |           |
| <b>AD005</b><br>Student Organization's Constitution and Bylaws (CBL)                                                                                                    |      |           |
| <b>AD006</b><br>General Plan of Activities with Budgetary Outlay                                                                                                        |      |           |
| <b>AD007</b><br>Advocacy Plan                                                                                                                                           |      |           |
| <b>AD008</b><br>Certificate of Clearance from PUP Student Council Commission on Audit (PUP SC COA)                                                                      |      |           |
| <b>AD009</b><br>Waiver of Responsibility                                                                                                                                |      |           |

**Remarks:**

**Date Finalized:**

**Date Approved:**

**Approved by:**