**STATEMENT OF INVOLVEMENT/COMMITMENT/ACCEPTANCE OF THE**

**ADVISER OF STUDENT ORGANIZATION**

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Faculty Adviser of the \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, Tarlac State University for the academic year \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, shall abide by the following provisions:

1. That, I shall attend meetings upon request of the organization;
2. That, I shall make myself available for consultation to all officers and members of the organization;
3. That, I shall provide guidance in the planning of activities of the organization so that the activities will serve to actualize the objectives of the organization;
4. That, I shall check as to the correctness of the accomplishment report, financial statement and a report of collection and disbursement of funds of the organization;
5. That, I shall be present in all organization’s activity or when the organization is representing the University;
6. That, I shall assure the safety of all members of the organization and all others who may be involved in the activity; and
7. That, I shall support all the programs and activities of the University towards the holistic development of students.

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Signature of the Faculty Adviser over Printed Name

Note: *Student organizations with more than one faculty adviser should fill-up a separate form.*

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Signature of the Faculty Adviser over Printed Name

Recommending Approval:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Head, Student Organizations Unit

Approved:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Dean, Office of the Student Affairs and Services

*Note: Student organizations with more than one faculty adviser should fill-up a separate form.*