

**Idaho State University Student Organization Account Exempt Form**

Student Organization \_\_\_\_\_

New Exemption

Renewal

Describe the Institution to whom the Student Organization demonstrates a financial reporting system and the nature of the system.

---

---

---

Federal Tax Identification Number \_\_\_\_\_

Describe the internal controls in place to ensure proper use of funds, i.e. how many signatures are required when issuing a check? Is there an adequate separation of duties among those responsible for maintaining the funds?

---

---

---

---

Where will the funds be physically kept? \_\_\_\_\_

List all institutions for which the Student Organization has established accounts.

---

---

---

Will the Student Organization be generating any revenues from sales?

If yes, are applicable sales taxes paid? \_\_\_\_\_

Does the Student Organization have paid personnel?

If yes, are appropriate payroll taxes accounted for? \_\_\_\_\_

Describe the procedures under which the Student Organization distributes scholarship funds?

---

---

How are donations to off campus accounts handled?

---

---

---

Upon receiving exempt status from Idaho State University, it is understood that the Student Organization is responsible for maintaining its funds and establishing proper controls. ISU is to remain a separate entity with regard to any issues concerning the funds. We also understand that in order to maintain our exempt status, we must submit a request to ISU Finance and Administration on ISU Student Organization Exemption Form (#FS-007) every three years. If exempt status is revoked, the organization will have 15 days to transfer all money to the appropriate University accounts. By signing this form, the organization warrants that they are not aware of any undisclosed, substantial risk to Idaho State University should exempt status be granted or extended.

\_\_\_\_\_  
Authorized Student Leader

\_\_\_\_\_  
Title

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Faculty Student Advisor

\_\_\_\_\_  
Title

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\*\*\*\*\*

FOR ACCOUNTING SERVICES USE ONLY:

\_\_\_\_\_  
University Approval

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date