

Cleveland State Community College
Cleveland, Tennessee

Application for Organization

Date: _____

Proposed Name of Organization: _____

Name of Organizational Offices	Name of Officer
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

The organization hereby agrees to serve its intended purpose and to abide by all policies that govern Cleveland State Community College and the Tennessee Board of Regents.

Approved: Vice-President
for Student Affairs

Approved: Club President

Approved: President of the Institution

*** Registration Packet Due On or Before September 30.**

Return packet to Office of Student Development (I -116'C)

Cleveland State Community College
Cleveland, Tennessee

Application for Organization

Statement of Faculty/Staff Advisor

I, _____, do hereby agree to serve as faculty/staff advisor for

I have read the Statement of Purpose *or* Constitution and By-Laws and am willing to accept the responsibility of advisement and supervision of this organization.

Signature of Faculty/Staff Advisor

Date

Student Senate Representative

Name of Club/Organization: _____

Name of Student Senate Representative: _____

E-Mail Address of Representative: _____

Phone Number of Representative: _____

Are you an officer of the club? Yes No If yes, please list title:

Name/Email Address/Phone Number of **Alternate Student Senate Representative:**

Return to: Office of Student Cevkkku (I -116"C)