

Officers of all clubs must remain enrolled at TCC and maintain at least a 2.0 GPA.

11. President/Chairperson/Spokesperson

Name _____ SIS ID# _____

Address _____

City _____ State _____ Zip _____

Phone/Cell Phone/Pager _____

E-Mail _____

12. Vice President/Co-Chairperson/Assistant

Name _____ SIS ID# _____

Address _____

City _____ State _____ Zip _____

Phone/Cell Phone/Pager _____

E-Mail _____

13. Treasurer

Name _____ SIS ID# _____

Address _____

City _____ State _____ Zip _____

Phone/Cell Phone/Pager _____

E-Mail _____

14. Secretary

Name _____ SIS ID# _____

Address _____

City _____ State _____ Zip _____

Phone/Cell Phone/Pager _____

E-Mail _____

15. Advisor

Name _____

Address _____

City _____ State _____ Zip _____

Phone/Cell Phone/Pager _____

E-Mail _____

16. Advisor Declaration:

I, _____

am familiar with the duties of an advisor and will be pleased to serve

as an advisor to _____

for the academic year _____ .

Signature _____

Date _____

17. We certify that:

- A. The information on this application is accurate.
- B. We will notify the Student Activities Office of any changes in this information.
- C. This club will not utilize discriminatory practices based on race, color, religion, national origin, gender, age, veteran status, disability, political affiliation, or sexual orientation. The Student Activities office must approve any exceptions.
- D. We will comply with the applicable college-wide student policies and procedures (available in the Student Handbook) and will inform other members of this club about these regulations.
- E. We understand that we are required to submit any information regarding campus, local or national affiliations and to keep this information current.

It takes 3 to 4 weeks to set up an account in the business office.

Student Senate action: Approved Disapproved Signature _____ Date _____

Reason for denial: _____

Student Activities Coordinator action: Approved Disapproved Signature _____ Date _____

Campus Dean of Student Services action: Approved Disapproved Signature _____ Date _____

Recognition: Granted Expires ____/____/____

Denied Reason for denial _____

Classification: Publications Honor Societies Cultural Religious International

Political Service Special Interest Academic Related

CC: Advisor Business Manager