



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

SS-049

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