OFFICE OF STUDENT ACTIVITIES

1400 COLLEGE DRIVE
WACO, TX 76708
(254) 299-8465

STUDENT ORGANIZATIONS: Application for Charter

The student organization to be known as:

_____

Requests official recognition as a student organization beginning in the _____semester of the _____ academic year.

The specific purpose of the organization shall be:_____

_____

_____

Activities will include:_____

_____

_____

Membership is expected to be approximately _____ and is open to all McLennan Community College students who meet the following qualifications:

_____

_____

The student organization described above hereby applies for a charter from McLennan Community College and the officers and advisors certify that they will conduct the business and activities of the organization in accordance with current editions of the ***General Conduct Policy*** *and* ***Student Leader and Advisor Handbook.***

_____		_____	
Founding officer/member's **Signature**	**Date**	**Advisor's Signature**	**Date**
_____		_____	
Founding officer/member's Signature	**Date**	**Advisor's Printed Name**	**Date**

- office use only -

Approval Recommended _____
Coordinator, Student Activities **Date**

Approved _____
Vice President, Student Success **Date**