



For Office Use Only

Received: _____

Approved: _____ Denied: _____

Proposed Student Club / Organization Chartering Form

Name of Club / Organization: _____

Advisor: _____

Email: _____ Phone: _____

Brief Description of Club:

Number of Active Members (At This Time) _____

About the Meetings: Time: _____ Day: _____ Place: _____

Meetings will be held (please circle) Weekly Monthly Once a Semester

Club Officers: Please list three student-members currently enrolled at WVNCC. These students will serve as the leadership for this club/ organization such as (President, Vice-President, and Secretary). Please nominate one representative from your club/organization to attend the SGA meetings.

Name: _____

Email: _____

Phone Number: _____ Student ID Number: _____

Officer Title: _____

Name: _____

Email: _____

Phone Number: _____ Student ID Number: _____

Officer Title: _____

Name: _____

Email: _____

Phone Number: _____ Student ID Number: _____

Officer Title: _____

IMPORTANT

A list of current members with email addresses and a copy of your groups' constitution must be submitted with your chartering form.

IMPORTANT:

The above organization agrees to adhere to the following statements in order to be considered for recognition:

1. No discrimination on the basis of race, sex, age, color, national origin, height, weight, marital status, sexual orientation, religion, handicap, or veteran status shall exist.
2. Only students enrolled at WVNCC are permitted to be members.
3. No club/organizations rules, constitution, or by-laws may be in conflict with the regulations or written policies of WVNCC.
4. The organization agrees to adhere to all applicable federal, state, and local laws as well as the policies of WVNCC.

Student Contact Signature: _____ Date: _____

Advisor Signature: _____ Date: _____

Director of Student Activities Signature: _____ Date: _____