

DATE _____

Associated Student Government (ASG) Club Charter Request

Please fill form out completely. An incomplete form or illegible names will not be accepted. Please send a copy to the ASG Director of Communications (asgcommunications@sjcc.edu) to Program Coordinator (juan.garcia@sjcc.edu), and retain a copy for requestor's files. Advisor must be a certified employee of the district and attend all meetings and events. Advisors may be full time faculty or staff member with supervisor's approval. ASG approval of request during meeting does not guarantee chartering. ASG will be notified of any pending action.

Name of proposed club/organization _____ Sem _____ Yr _____

Advisor name _____ **Email** _____ **Phone #** _____ **Signature** _____

Club Member name _____ **Position** _____ **Email** _____ **Signature** _____

President

Vice President

Treasurer

Other - Please State

Other - Please State

If more positions are assigned, please fill out and attach another form.

Purposes: 1. _____
2. _____
3. _____

Membership requirements: _____

Description of activities to be carried on by club/organization: _____

Meeting location _____ Day/Time _____

Names & student ID numbers of interested students or staff (10 needed for club formation; all must have paid the activity fee)

1. _____ 6. _____
2. _____ 7. _____
3. _____ 8. _____
4. _____ 9. _____

- Meetings must be open to all students
- This form is to be filled out and on file at the beginning of each semester for clubs, along with Constitution and By-Laws.
- Club officer's enrollment will be verified to determine eligibility to hold office.
- All requests for funds withdrawal MUST be signed by advisor and two officers above if club; chair(s) and one committee member above if diversity organization.
- Students and staff must follow all guidelines, policies, and procedures set forth by the SJ/ECC District and/or other governing agencies.

FOR CAMPUS DEPARTMENT USE ONLY

Date received _____ Date approved _____ Account # assigned: _____

ASG Advisor approval signature _____

Student Accounts affirmation signature _____