



Application for Recognition of Organization

Name of Organization _____

Date of Application _____

Proposed Activities of Organization _____

Are two copies of your proposed constitution and by-laws attached? Yes ___ No ___

Outside affiliations with any other organization must be approved by the Vice President of Student Services:

List any national, state, or local organizations with which you plan to be affiliated:

What is the name, address, and phone number of the president of the national, state, or local organization with which you plan to be affiliated? _____

Attach a copy of the proposed terms of affiliation with Haywood Community College organization as drawn up by the local, state, or national organization.

I approve of the above affiliation: _____

Officers of the Organization:

President: _____

Vice President: _____

Secretary/Treasurer: _____

We, the undersigned of Haywood Community College, as current students in good standing, are interested in becoming members of the organization (suggested minimum of 25 interested members prior to requesting sanction):

Please see attached sheet

I am familiar with the duties of an Advisor and I will be glad to serve as an Advisor to the _____ Organization for the year _____

Advisor Signature (full time faculty/staff member) Date

Co-Advisor Signature (fulltime faculty/staff member) (Optional) Date

Approval:

The Student Government Association of Haywood Community College following action on this petition:

Date of Meeting _____ Vote of the Meeting _____

Signature of SGA President

Signature of SGA Secretary

Approval of this petition by SGA Advisor:

_____ Date: _____

Approval of this petition by VP of Student Services:

_____ Date: _____

Approval of this petition by the HCC Administrative Council

_____ Date: _____

_____ Date: _____

_____ Date: _____

_____ Date: _____

_____ Date: _____

_____ Date: _____

_____ Date: _____

Approval of this petition by the President of Haywood Community College

_____ Date: _____

Letter of action sent to President of Organization: _____ by _____

Letter of action sent to the Faculty/Staff Advisor: _____ by _____