CLUB/ORGANIZATION RECOGNITION REQUEST

Date: _______________________

Student Club: __________________________________________

Club Officers

President/Chair: _________________________________________

Vice Pres/Co-chair: _________________________________________

Secretary: _________________________________________

Treasurer: _________________________________________

Other Members: _________________________________________

Club Advisor: _________________________________________

Advisor Signature: _________________________________________

Submit a copy of organizations constitutions and/or bylaws along with this completed form

To be completed by Student Senate (Advisor or Board Member):

Club Status: Active Inactive

Signature of Student Senate Advisor

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This document is available in alternative formats to individuals with disabilities, consumers with hearing or speech disabilities may contact us via their preferred Telecommunications Relay Service by dialing 711 (toll-free nationwide).