

New York Medical College Student Club/Organization Request Form

Club/Organization Name:

Date:

Mission, Purpose and Goals of the Student Club/Organization

(State briefly the main focus of the Student Club/Organization and attach copies of any constitution, bylaws or other organizational documents)

Listing of All Officers or Interim Officers if a new student club/organization

(Names, position, duties and responsibilities, addresses and telephone numbers of each officer)

Listing of All Members (Names and class of all members)

Meetings (frequency, dates, times and place of all meetings)

Schedule of Proposed Events and Activities for the Academic Year (dates, times, locations, purpose, etc.)

Student Club Officers' Signature:

Officers:

President: Vice President: Secretary: Treasurer: _____

Student Activities Director Signature: _____ **Date** _____

Associate Dean for Student Affairs Signature: _____ **Date** _____

Other School Official(s) _____ **Date** _____

Approved Date _____

All Student Clubs/Organizations must complete this Request Form on an annual basis. Any change to a Club's/Organization's mission and purpose, officers or scheduled and approved activities need to be resubmitted for approval.

Copy to Treasurer of the Student Senate or (or equivalent student organization from the other two schools).