

College of the Canyons
Office of Student Development

Petition for Club Charter

Name of Club/Organization: _____

Type of Organization: _____

Individual Requesting Charter: _____

Name

Street

City

Zip Code

Phone Number

Email

Faculty Advisor: _____

Name

Department

Extension/Phone Number

List below the names of at least five (5) currently enrolled COC students who will be members of the club/organization:

<u>NAME</u>	<u>ADDRESS</u>	<u>PHONE</u>	<u>COC ID#</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

By signing below, we agree our policies and practices will in no way conflict with the regulations of the State of California, College of the Canyons, the Inter Club Council or the Association Student Government.

Signed: _____
Individual Requesting Charter Date

Faculty Advisor Date

Approved for ICC and ASG Review: _____
Office of Student Development Date

Approved for ICC and ASG Recognition: _____
ASG Vice President Date