Club Officer's List

Name of Club: _____ Date: ____/____/____

Type: ☐ Professional ☐ Academic ☐ Service ☐ Social
☐ Religious ☐ Political ☐ Honorary ☐ Other _____

Instructions: *Pursuant to the Student Government Constitution, all MCC clubs must submit a current list of qualified officers to the OSA, L-154c each semester for verification in order to maintain official recognition. Please attach an unofficial transcript for each officer listed.*

To be **eligible** to hold an executive officer position in a sanctioned club. students must:

a) Currently be a registered student at MCC. **b)** Have paid a Student Activity Fee at MCC.
c) Have completed three (3) academic credits at MCC. **d)** Have earned a cumulative GPA of 2.0 or better.

This officer list is submitted for verification for the semester of ☐ **Fall 20____** ☐ **Spring 20____**.

This officer list is authorized by club **minutes** dated ____/____/____

*****Office Use Only*****

PRESIDENT: _____ @|___|___|___|___|___|___|___| Name (print) Banner ID _____ Home Address City and State Zip (____) _____-_____ _____ Telephone Signature Email:_____	**Semester Hours** ☐ **Fall** ☐ **Spring**	**Cumulative GPA** ☐ **Fall** ☐ **Spring**
VICE PRESIDENT: _____ @|___|___|___|___|___|___|___| Name (print) Banner ID _____ Home Address City and State Zip (____) _____-_____ _____ Telephone Signature Email:_____	**Semester Hours** ☐ **Fall** ☐ **Spring**	**Cumulative GPA** ☐ **Fall** ☐ **Spring**
SECRETARY: _____ @|___|___|___|___|___|___|___| Name (print) Banner ID _____ Home Address City and State Zip (____) _____-_____ _____ Telephone Signature Email:_____	**Semester Hours** ☐ **Fall** ☐ **Spring**	**Cumulative GPA** ☐ **Fall** ☐ **Spring**
TREASURER: _____ @|___|___|___|___|___|___|___| Name (print) Banner ID _____ Home Address City and State Zip (____) _____-_____ _____ Telephone Signature Email:_____	**Semester Hours** ☐ **Fall** ☐ **Spring**	**Cumulative GPA** ☐ **Fall** ☐ **Spring**

_____ ____/____/____
Club Advisor **Date**

☐ **Approved** ☐ **Denied** _____ ____/____/____
Director of Student Activities or Designee **Date**

Rev 7/27/11