

## MOLLOY COLLEGE STUDENT ORGANIZATION CONTACT FORM

SEMESTER \_\_\_\_\_ YEAR \_\_\_\_\_ ORGANIZATION NAME \_\_\_\_\_  
 MEETING DAY \_\_\_\_\_ TIME \_\_\_\_\_ BUILDING \_\_\_\_\_ ROOM \_\_\_\_\_

CHECK ONE:

MSG AFFILIATED

We are an organization whose constitution has been approved by the MSG. We have at least 5 active members and an advisor.

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Our most recent constitution is on file with the MSG and Office of Student Affairs.

MSG FUNDED

We are an affiliated organization that also receives a yearly budget from MSG. We have at least 5 active members and an advisor.

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Our most recent constitution is on file with the MSG and Office of Student Affairs.

**OFFICER/ADVISOR INFORMATION:**

	FULL NAME w/Middle Initial	E-MAIL	PHONE	MAILING ADDRESS
PRESIDENT				
VICE PRESIDENT				
TREASURER				
SECRETARY				
ADVISOR				

\_\_\_\_\_ We have received a copy of the Student Organization Manual and we agree to comply with all regulations therein, with College policies and with local, state and federal law.

Organization President's Signature \_\_\_\_\_ Date \_\_\_\_\_

Please return entire form to Office of Student Affairs/Campus Life (Student Development Center). Form should be typed or neatly printed.