



Annual Student Organization Registration Renewal

Please complete this form and return to the Dean of Students for review by the IECC Student Advisory Board by April 30th.

Club Name: _____

Campus: ☐ FCC ☐ LTC ☐ OCC ☐ WVC

Approximate enrollment for this student organization: _____

Organization Category (please choose one):

☐ Academic ☐ Arts/Cultural Awareness ☐ Club Sports ☐ Faith-based ☐ Other

Meeting Information (day, time, place, frequency):

Has the organization established goals for next academic year? ☐ YES ☐ NO

If yes, please provide established goals:

Has this Student Organization elected officers for the following academic year? ☐ YES ☐ NO

If yes, please attach the list of officers and students who will serve in the next academic year.

If no, please identify the approximate date when officers will be elected or selected for the next academic year: _____

Please provide any additional information about this Student Organization that you think would be helpful to ISAB.

Advisor Name: _____

Advisor Email and Phone#: _____

Advisor's Signature: _____