

For SGA VP's use only |

Date Received ____/____/____

Date Approved ____/____/____

Not Approved

GOUCHER COLLEGE

STUDENT GOVERNMENT ASSOCIATION

CLUB CHARTER FORM

CLUB NAME: _____

EXECUTIVE BOARD/CLUB OFFICERS:

President:

First _____ Last _____ Telephone No. _____

Vice President:

First _____ Last _____ Telephone No. _____

Treasurer:

First _____ Last _____ Telephone No. _____

Secretary:

First _____ Last _____ Telephone No. _____

*** SGA Rep:**

First _____ Last _____ Telephone No. _____

Other:

_____ First _____ Last _____ Telephone No. _____

_____ First _____ Last _____ Telephone No. _____

Advisor:

First _____ Last _____ Telephone No. _____

Advisor Signature

* The SGA Rep can be an officer or member of the club.