|  |  |
| --- | --- |
| **Semester(Term/Year)** | Choose an item. |

|  |  |  |  |
| --- | --- | --- | --- |
| **Name of Student Organization:** | Click or tap here to enter text. | **Date** | Click or tap to enter a date. |

**Purpose/Mission Statement:**

|  |
| --- |
| Click or tap here to enter text. |

**Name and Contact Information of Organization’s Officers (Must be UHMC Students).**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Office** | **Name** | **Phone Number** | **E-Mail (@hawaii.edu)** | **Student ID Number** | **\*Website Information** |
| **President** | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| **Vice President** | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| **Secretary** | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| **Treasurer** | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| **Preferred Contact Person** | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |

\*Please indicate if you would to share your officer’s contact information on our UHMC Campus Clubs website using the following letters (if you do not want it shared, leave the column blank).

N=Name | P – Phone Number | E = Email

**Name and Signature of Advisor(S), Title(s), and contact information**:

(Advisors **MUST** be a UHMC faculty or staff member)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Advisor’s Name** | **Title at UHMC** | **E-Mail** | **Phone Number** | **Signature** |
| **Click or tap here to enter text.** | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| **Click or tap here to enter text.** | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |

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| **Sources of Financial Support:** | Click or tap here to enter text. |

|  |  |
| --- | --- |
| Name of affiliate organization: | Click or tap here to enter text. |

**Affiliation with any other group on or off campus** (check one): Yes  No

Contact person in affiliate organization Information:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Name: | Click or tap here to enter text. | Phone: | Click or tap here to enter text. | Email: | Click or tap here to enter text. |

**Attach the Following:**

**1 Copy of Club’s Constitution**

**1 Copy of Club’s By-Laws**

**List of current members**

**Constitution of any affiliate organization**