

Fanshawe Student Union Club Charter

Clubs must be open to all full-time registered post-secondary students at Fanshawe College regardless of race, religion, ability, gender or monetary status.

Please complete this form and return to the VP Internal Affairs at the FSU main office - SC2001.

Club Information:

Name of Club: _____
(Please spell out short forms)

Nature of Club: _____

Purpose and Objectives of Club: _____

(Please attach separate sheet if needed)

To form a club there must be an elected/appointed President, a Vice President and a Treasurer or Secretary.

President: _____ Student #: _____

Email: _____

Vice President: _____ Student #: _____

Email: _____

Treasurer: _____ Student #: _____

Email: _____

Secretary: _____ Student #: _____

Email: _____

(If these positions aren't elected/appointed at time of charter application – please inform the FSU main office as soon as the positions are filled)

Submitted by: _____ *(please print)*

Signature: _____

Date: _____

Student Information:

Clubs must have a minimum of five full-time registered post-secondary students. All student numbers will be verified before the club is ratified. In order to receive funding, there must be a minimum of ten full-time registered post-secondary students.

(please print neatly)

Name	Student #	Phone #	Email Address
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			

(please attach separate sheet if more room is needed)

For financial funding the following information is required:

Signing Officers: (1) _____ (2) _____

Bank Acct.#: _____

Bank Location: _____

(if this information isn't available at time of charter application, please submit to FSU as soon as possible)

For office use only:

Submitted to: _____

Date: _____

Student #'s Checked: Yes No

Date of Approval: _____

Meeting #: _____

FSU Signature: _____