

**HUSTON-TILLOTSON UNIVERSITY  
STUDENT AFFAIRS OFFICE  
OFFICE OF CAMPUS LIFE & FYE**

**New Student Organization Proposal Form**

1. Organization Name: \_\_\_\_\_
2. Statement of Purpose: \_\_\_\_\_
3. Membership requirements if any: \_\_\_\_\_
4. Approximate expected membership: \_\_\_\_\_
5. Does your organization have any national or regional affiliation?      Yes        No
6. Type of affiliation: \_\_\_\_\_

Current National Officer				Current Regional Officer			
Name:				Name:			
Title:				Title:			
Address:				Address:			
City:				City:			
State:		Zip:		State:		Zip:	
Phone Number:	( )	-		Phone Number:	( )	-	

7. Advisor Information:

<b>Note:</b>	All organizations must have a faculty/staff member as an advisor.
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Primary Advisor				Secondary Advisor			
Name:				Name:			
Address:				Address:			
City:				City:			
State:		Zip:		State:		Zip:	
Home Number:	( )	-		Home Number:	( )	-	
Work Number:	( )	-		Work Number:	( )	-	
Mobile Number:	( )	-		Mobile Number:	( )	-	

**Note:** A copy of the organization's constitution and by-laws must be submitted to the Office of Campus Life & FYE along with this form. There will be no exceptions.

