# MANSFIELD CAMPUS STUDENT ORGANIZATION REGISTRATION FORM

Name of Organization:

_____

Statement of Purpose (or Mission Statement): *Please attach a Constitution.*

_____

_____

_____

Officer(s) and additional Student Members (minimum of 4 total):

| Name | Office | OSU/NC State/ | Phone Number & E-mail |
|---|---|---|---|
| | | | E: _____ |
| _____ | _____ | _____ | P: _____ |
| | | | E: _____ |
| _____ | _____ | _____ | P: _____ |
| | | | E: _____ |
| _____ | _____ | _____ | P: _____ |
| | | | E: _____ |
| _____ | _____ | _____ | P: _____ |

Name(s) of Faculty/Staff Advisor(s) (minimum of one):

| _____ | _____ | _____ |
|---|---|---|
| Print name | Signature | Date |
| _____ | _____ | _____ |
| Print name | Signature | Date |

Registration materials submitted by:

| _____ | _____ | _____ |
|---|---|---|
| Print name | Signature | Date |

**Please return to: the Office of Student Engagement – 2nd floor Eisenhower Hall**

**For Office Use Only**

Registration Status: ___Provisional (_____) ___Official (_____)
Date Date

Registration Approved by:

_____ _____
Coordinator of Student Engagement Date