

## ASGFC MSU Recognition Application

\*This application must be completed and returned to ASGFC MSU by the end of September.

Please type or print legibly.

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Student Organization Name

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Purpose of the Group (Brief Description)

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Student Spokesperson/President

Phone/E-mail

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GFC MSU Contract Professional Staff or Faculty Name

Phone/E-mail

When was the last time your Student Organization reviewed and approved

Constitution/Bylaws? \_\_\_\_\_

All new and returning Student Organizations **MUST** submit a current copy with this application.