



Graduate Student Organization Registration Form

Please Check One:

Registration Renewal _____ (year)
 Initial Registration

Name of Organization: _____ Organization Phone # _____

Organization Mailing Address: _____
 _____ City _____ State _____ Zip _____

Statement of Purpose: _____

Position	Name	Email Address	Local Address	Phone	Program
President*					
Vice President					
Secretary					
Treasurer					
Advisor					

My signature indicates that I am aware of and agree to abide by GSA policies, the Student Conduct Code, and all other UMBC rules & procedures

Signatures (w/date): _____ Date of Next Elections: _____

President: _____

Vice President: _____

Secretary: _____

Treasurer: _____

Note: For initial registration, please attach a list of members (at least five are required) and a signed statement by a faculty/staff member agreeing to serve as an advisor.

* I give permission for GSA to post my email address on its website so those interested in my GSO can reach me. Yes ___ No ___