

BROOKDALE COMMUNITY COLLEGE

CLUB CUBICLE REQUEST FORM 2018-2019

Assignment of office space in the Warner Student Life Center's Club and Organization room is based on the student group's planned use for the space, expected level of involvement, and contributions to the quality of campus life as evaluated by the Office of Student Life & Activities and student representatives from the Student Life Board.

Official Name of Organization:		
*Name of President/Chair or Main Contac	et:	
* Please note the person listed here will be re with Student Life & Activities in regards to a		
Contact Phone #:	E-Mail:	
Briefly describe the purpose or mission of your or	ganization:	7
How will the use of a cubicle help your group in th	ne coming year?	CTIVITIES
How many hours a week do you think your group		
Officer Meetings:	Social Interaction/Lou	nging:
Organization Office Work: (phone/computer use, paperwork, etc.)	Other (Please Specify):	
How many general members does your clu	ıb have?	
How many do you consider to be active me	embers?	
How many leadership positions are in your	r E-Board?	
What benefits or special services does your	r group provide to the cam	pus community?
On a separate piece of paper please list your grouthe past year that were open to the general public/		
Name of Event/Project	Date	Location
# of Participants		Co-Sponsor(s)
Please sign and return this form and the accompanying your knowledge the above statements are true. Forms studentlife@brookdalecc.edu.		
Executive member completing form	 Date	