**NEW STUDENT CLUB REGISTRATION FORM**

*(Please underline the applicable*)

**For approval**

**For information**

**Shaping Swinburne’s Future Today**

The Entrepreneurial University  
The Research Intensive University  
Internationalisation  
Flexible Learning and Teaching  
The Intersectoral Advantage

**\*Please fill in the form using CAPITAL LETTERS and circle whenever appropriate.**

Name of Club :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Advisor(s) :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

President : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Vice President: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Secretary : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Treasurer : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Affiliation with external clubs or organisation: Yes / No <Please circle applicable>

If yes, please indicate which club or organisation:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Membership Fee: RM \_\_\_\_\_\_\_\_\_\_\_\_\_ monthly / semester / yearly

Subscription Fee: RM \_\_\_\_\_\_\_\_\_\_\_\_\_ monthly / semester / yearly

How many times do you meet: \_\_\_\_\_\_ in a month.

\_\_\_\_\_\_ in one semester.

Regular venue for meetings / activities:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

………………………… ……………………….

(Insert Name) (Insert Name)

President, Secretary,

<Insert your club name> <Insert your club name>

Date: …………………. Date: ………………..

**Endorsed by,**

***Please attach the following documents:***

1. ***Minutes of first meeting***
2. ***Club’s rules and regulations***
3. ***Club’s Terms of Reference***
4. ***Office Bearers name list***
5. ***Members name list***
6. ***List of activities planned for the year***

………………………

(Insert Name)

President,

Swinburne Sarawak Student Council

Date: ………………….

**Signatories**

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| **Student Experience and Activities** |
| **Decision** : Approved / Not Approved  **Comments** :  …..………………………  (LEANDRA SAGAH)  Student Operations Officer,  Student Experience and Activities.  Date: …………………… |
| **Student Experience and Activities** |
| **Decision** : Approved / Not Approved  **Comments** :  …..………………………  (MOHAMED HISYAM JAMAL)  Assistant Manager,  Student Experience and Activities.  Date: …………………… |
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| --- |
| **Student Operations** |
| **Decision** : Approved / Not Approved  **Comments** :  …..………………………  (HUSSAIN BIN TAIBAN)  The Registrar and Director of Student Operations,  Swinburne University of Technology  Sarawak Campus.  Date: …………………… |