## HOWARD UNIVERSITY WASHINGTON, D.C. 20059

DIVISION OF STUDENT AFFAIRS

OFFICE OF STUDENT ACTIVITIES

Contact Name
Contact Hanne
Address
City, State, Zip
Phone
E-Mail

posed Objectives in Brief of anization					
ME (Please Print) icate (f) if founding member)	ST (MINIMUM OF TEN SIGNATURES REQU SIGNATU	*	UNDING MEMBERS) I.D.#	ADI	DRESS
CAMPUS ADVIS	SOR MANDATORY: PHONE NUMBER	ADDRESS			
MAIL					
PROVAL RECOMMENDED:	Director of Student Activities HUSA President_ Vice Proyest for Student Affairs			Date	