

Student Government Association of New Mexico Institute of Mining and Technology

Membership Application Form		
Name:	E-mail:	
Major:	Minor:	

Authorization Agreement for Membership/Partnership

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to membership, I understand that false or misleading information in my application or interview may result in my termination.

The Partnership shall begin on _____ and shall continue until ____ of the following year until re-elected or unless earlier terminated at discretion of SGANMIMT.

I agree to attend periodic meetings that shall be held regularly as determined by the SGANMIMT.

Applicants must keep good academic standing which shall be determined by the NMIMT.

	S (A) TITLE	E47 /281
School Information		
Current Year as a Student		
(freshman, sophomore, etc):		
Number of Semesters		Currently in Good Academic
Completed at NMIMT:		Standing: yes / no
Position Applying for:		Semester Applying for (fall,
		spring, etc):
Signature		
Authorized Signature:	acili anaci ililicili	Date:

