



Claremont Graduate University

Student Life, Diversity & Leadership

STUDENT INTEREST SIGNATURE SHEET

Name of Proposed Organization: _____

Purpose: _____

By signing your name below, you are stating that as a student of Claremont Graduate University, you are supportive of such an organization coming into existence. You are not pledging your membership if the organization becomes recognized.

1. _____ 11. _____ 21. _____

2. _____ 12. _____ 22. _____

3. _____ 13. _____ 23. _____

4. _____ 14. _____ 24. _____

5. _____ 15. _____ 25. _____

6. _____ 16. _____ 26. _____

7. _____ 17. _____ 27. _____

8. _____ 18. _____ 28. _____

9. _____ 19. _____ 29. _____

10. _____ 20. _____ 30. _____