

**DMS Student Interest Group**  
***Renewal***

Name of Interest Group \_\_\_\_\_

Student Leader(s) \_\_\_\_\_  
\_\_\_\_\_

Faculty Advisor \_\_\_\_\_

Statement of Purpose \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Names and signatures of five (5) students interested in the proposed renewal:

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

Approved for renewal

Not approved for renewal

\_\_\_\_\_  
*Signature of DMS Student Government President*

\_\_\_\_\_  
*Date*