



GRADUATE REPRESENTATIVE PETITION

If your department does not hold a general election for GSU representatives and does not have a graduate organization, this form should be used in order to become a Representative. Please supply all requested information and return the completed form to the GSU Office (Mezzanine – LaFortune Student Center). If you have the signatures of more than 25% of the amount of students in residence in your department, you will be recognized as a departmental representative.

YOUR NAME _____
(PLEASE PRINT)

DEPARTMENT _____

DEPARTMENT ADDRESS _____

PHONE # _____ E-MAIL _____

NUMBER OF GRAD STUDENTS IN RESIDENCE _____

Signature confirming number of Grad Students in Residence (Department Assistant or Graduate Director).

Signature Title Date

GSU PUBLICITY & PROCEDURES CHAIR ACCEPTANCE _____
Signature Date

****PETITION SIGNATURES****

Signature Print Name

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