



PETITION FOR CANDIDATES RUNNING FOR GRADUATE STUDENT SENATE OFFICE 20____-20____

Candidate's name a	nd ID#:			
Candidate's e-mail:				
Department:				
Primary or Alternate	2:			
Total number of gra	duate students in your depart	rtment:		
		the total number of the graduants from your Department, wh		
	ed, representing the Departn	nent of		
	0			
	onstitutes a vote for this can		ar _2020	
N. A. B. 675	·	PLEASE, PRINT YOUR NAME CLEARLY:		
NAME	ID#	SIGNATURE	EMAIL	

(Please, attach additional sheets as needed)