52nd Senate Session Petition

Please write legibly.

Full name (first & last): ___________________________ Preferred Name: ___________________________

Preferred Pronouns: ☐ She/Her/Hers ☐ He/Him/His ☐ They/Them/Theirs ☐ Other: ____________________

Banner ID: 900_______ Phone Number: (_____)____-________ Email: ________________________@appstate.edu

Please remember that you must meet the minimum GPA requirement of 2.25 to hold a senator seat.

Seat intending to petition for: __________________________________

Please read before completing your petition:

1. Ensure that you are a member of the constituency your intended seat represents. For any club-affiliated seat, make sure you are on the club’s AppSync roster.
2. If you’re petitioning to represent a class seat or a general senator seat, complete the form with 50 student signatures who are members of the constituency your intended seat represents.
3. If you’re petitioning to represent an organization (from the ones listed below), you do not need signatures, only the signature from one of the advisors to confirm you have been appointed.
   a. Lesbian Gay Bisexual Transgender (LGBT) Center: ___________________________________
   b. Renewable Energy Initiative (REI): _______________________________________________
   c. Women’s Center: _______________________________________________________________
   d. Residence Hall Association (RHA): _____________________________________________
   e. Club Council (CC): ___________________________________________________________
   f. Appalachian and the Community Together (ACT): _________________________________
   g. Appalachian Popular Programming Society (APPS): _______________________________
   h. The Multicultural Center (MCC): ______________________________________________
   i. The Student Veterans Center (SVA): ____________________________________________
4. If you’re petitioning for any other seat, complete the form with 25 student signatures who are members of the constituency your intended seat represents. For any group affiliated seat, make sure these students are on the group’s AppSync roster.

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FOR ADMINISTRATIVE USE ONLY:

Date: ______________ Time: ______________

PLEASE DIRECT ANY QUESTIONS OR CONCERNS TO JOANNA FAITH WILLIAMS, DIRECTOR OF ELECTIONS, AT WILLIAMSJF2@APPSTATE.EDU
I give Appalachian State University Student Government Association permission to search and obtain my Appalachian State University record. The information obtained may include but is not limited to: grades, transcripts, and any violations of the Appalachian Student Code of Conduct.

______________________________
Sign here

FOR ADMINISTRATIVE USE ONLY:
Date: ______________ Time: ______________

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