



# Student Government Association Complaint Form

**PART I – COMPLAINANT(S)** Please provide the personal information of the person(s) reporting the violation.

First	Middle	Last	Student ID
E-mail		Phone	
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First	Middle	Last	Student ID
E-mail		Phone	

**PART II – RESPONDENT(S)** Please provide the personal information of the person(s) performing the violation.

First	Last
First	Last

**PART III – WITNESSE(S)** Please list all witnesses to the alleged violation.

Name	Email	Phone
_____	_____	_____
_____	_____	_____

**PART IV – VIOLATION DESCRIPTION**

____/____/____	____:	_____
Date of Violation	Time of Violation	Location of Violation
Description		
_____		
_____		
_____		
_____		
_____		
<b>Please list any evidence supporting this violation claim</b> (feel free to attach any pertinent documents):		
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_____		

***PART V – FOR ELECTIONS RELATED VIOLATIONS ONLY***

**How does the alleged action violate the spirit of healthy and friendly competition?**

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**How does the alleged action give the perpetrating candidate an unfair advantage in the campaign?**

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Complainant's Signature \_\_\_\_\_

\_\_\_\_\_ Date

Complainant's Signature \_\_\_\_\_

\_\_\_\_\_ Date

***FOR OFFICE USE ONLY***

Received By \_\_\_\_\_ Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Time \_\_\_\_ : \_\_\_\_ am pm