

ELECTION REPORT AND OFFICERS' LIST

(Return this form within 3 weeks after your election.)

Office of Student Activities, 1401 S. US Hwy 421, LSF, Rm. 78/80, Westville, IN 46391
 • (219) 785-5660 • pnebriaga-stoeffler@pnc.edu • gdemski@pnc.edu • www.pnc.edu/sa/pncactivities/ •

Student Organization: _____ Mailing Address: _____ Phone: _____

Web address: _____ Student Organization's email: _____

Date of election: _____ Date of next election: _____ Length of term of office: _____ semester _____ year _____

Number of members in your organization: _____ Who is completing this form: _____ Phone: _____

Officers	Full Name	Address	Phone	*Student ID #	Email
President					
Treasurer					

Other Officers	Full Name	Address	Phone	*Student ID #	Email

Advisors	Name	Address	Phone	*Staff ID #	Email
First					
Second					

We, the current president and advisor, certify that the above information is accurate to the best of our knowledge and agree to abide by all University regulations and State and Federal laws including but not limited to hazing, alcohol, and handling of confidential student information. (For more information, see *University Regulations, Advisors' Handbook*, or contact the Student Activities and Organizations office.)

President's signature | _____ | _____
Advisor's signature (First) | _____ | _____
Advisor's signature (Second)

**ID# is a required field. This information is used to verify identity of individuals to confirm eligibility. Information is kept confidential and will remain in a secured location.*

SAO use: date received _____ date entered _____ code _____ RSC _____ SAO _____