NAME: (Print) __________________________________________

Last  First  M.I.

E-MAIL ADDRESS:_______________________________________

TELEPHONE: __________________________________________

NOTE: The signatures of 20 registered SUNY Morrisville students shall be needed on the reverse of the application before acceptance to Student Government Organization (SGO).

NOTE: Any member of the Assembly who misses 2 consecutive or 3 non-consecutive meetings in one (1) semester is suspended from SGO for that semester. Please see the SGO Constitution for the unsuspension process.

________________________________________________________
Applicant’s Signature  Date

________________________________________________________
S.G.O. President  Date

________________________________________________________
S.G.O. Secretary  Date

________________________________________________________
Assembly Action  Date