

THE UNIVERSITY OF OKLAHOMA STUDENT ASSOCIATION
GRADUATE STUDENT SENATE

SENATOR CREDENTIAL FORM

Please complete the following information and return the form to the Senate office (room 187) of the Conoco Student Leadership Wing in the Oklahoma Memorial Union. Please be sure that each new Senator signs the Senator Responsibility Statement on the reverse side of this form.

Department information and Graduate Liaison Contact Information.

Fill in the form and provide the complete name of your department (not just the acronym).

Department	
Office Location	
Graduate Liaison	
OU E-mail	
Campus phone	

Senator Information

Will this department send only one Senator for the upcoming year? YES___ NO___

Senator 1

Senator Term		Returning Senator? Yes___ No___
Name		
Address		
Phone Number		
e-mail		

Senator 2

Senator Term		Returning Senator? Yes___ No___
Name		
Address		
Phone Number		
e-mail		

The signatures below verify that the above named persons have been selected to serve as proper senators for this department. The selection process was in keeping with the Senate By-Laws and the UOSA Constitution and proof of selection, such as a vote tally, is attached hereto.

Graduate Liaison

Signature

Date

Senator 1

Signature

Date

Senator 2

Signature

Date

SENATOR RESPONSIBILITY STATEMENT

Senator 1

By signing below, I agree to serve on the Graduate Student Senate in the following capacity:

- (a) Attend and participate in regularly scheduled Senate meetings.
- (b) Attend and participate in regularly scheduled committee meetings.
- (c) Represent the interests of the graduate students of my department during all Senate and committee meetings.
- (d) Inform the graduate students in my department of all Senate activities, such as legislation affecting graduate students and deadlines for grants.
- (e) Notify the Senate Secretary, my department's graduate liaison, and/or graduate student association if I am unable to complete my term as Senator so another person from my department can replace me.

Senator 1

Signature

Date

Senator 2

By signing below, I agree to serve on the Graduate Student Senate in the following capacity:

- (a) Attend and participate in regularly scheduled Senate meetings.
- (b) Attend and participate in regularly scheduled committee meetings.
- (c) Represent the interests of the graduate students of my department during all Senate and committee meetings.
- (d) Inform the graduate students in my department of all Senate activities, such as legislation affecting graduate students and deadlines for grants.
- (e) Notify the Senate Secretary, my department's graduate liaison, and/or graduate student association if I am unable to complete my term as Senator so another person from my department can replace me.

Senator 2

Signature

Date