



ELECTION COMPLAINT AND CONTESTION FORM

Form must be submitted to the Campus SG Advisor's Office, no later than 5:00 pm on the Monday, September 21.

Name of person filing complaint

Date

Street Address, City, State, and Zip Code

(_____) _____

Phone number

Email Address

Person(s) whom complaint or contestation is against:

List alleged violation citing Elections Statute 300 and the SG Constitution:

Describe specific nature of alleged violation (what happened, be specific – including time and dates):

Signature of student filing complaint

For Official Use Only – Do Not Write Below This Line

Date Rec'd: _____

Action Taken: _____

Time: _____

Notice Given: _____

Authorized Signature

Date
