

2020-2021 Application for Political Campaigning

2020-2021 Application for Tollical Campaigning		
Candidate Information Name of candidate:		
Applicant Information Name:		
Phone:		
Email:		
Campaign Request Date (day/month):		
Time period (starting and end	ling):	
Will the candidate be present for campaigning? Yes or No (circle one)		
Name(s) of Campaign Works 1. 2 3. 4. 5.	er(s) Present (maximum of 5)	
Campaign Location:		
	can only campaign on residence community floors becific floor or in the University Dining Center. I student floors; lobby student floors; lobby student floors; lobby student floors; lobby student floors inside dining center; outside dining center entrar	Locations options include:
Signature of individual submitting application		Date of application

NOTE: A copy of this form will be returned to the applicant after approval has been granted.

Date of approval

Signature of Residential Life Associate Director (or designee) approving application