

# FALL CONFERENCE - OCTOBER 2017



The State University of New York  
Student Assembly

## DESIGNATED ALTERNATE FORM

This form must be completed by the properly elected or appointed delegate designating an alternative to exercise their rights as a voting member of the SUNY Student Assembly. You may not complete this form electronically.

I hereby authorize the individual named below to serve as my designated alternate and to vote on my behalf at the business meeting of the Fall Conference of the Student Assembly of the State University of New York, to be held on October 13-15, 2017 in Albany, New York.

This proxy is valid for: \_\_\_\_\_ The 2017 Fall Conference Business Meeting (in its entirety)  
\_\_\_\_\_ The following defined time(s) during the 2017 Fall Conference  
Business Meeting: \_\_\_\_\_  
\_\_\_\_\_

The first voting delegate is always the president of the student government organization. If an organization has more than one delegate, they should be elected by the student population in which they serve elected (or appointed as determined by the organization's organizing documents). This form should only be filled out by the elected or appointed voting delegate of the Student Assembly of the State University of New York designating an alternate. This form needs be signed and dated by both the elected or appointed delegate and the student who will be their alternate for the weekend. Designated alternates must attend the same institution as the elected or appointed delegate.

\_\_\_\_\_  
(Elected Delegate Name)                      (Elected Delegate Signature)                      (Date of Signature)

\_\_\_\_\_  
(Alternate Delegate Name)                      (Alternate Delegate Signature)                      (Date of Signature)

(STOP HERE – FOR RULES COMMITTEE USE ONLY)

Received by \_\_\_\_\_, \_\_\_\_\_ of the Rules Committee.  
(Print Name)                      (Print Title)

\_\_\_\_\_  
(Signature of Rules Committee Officer)                      (Date of Signature)