# South Dakota State University Elect ve Polit cal O ce Report Form

# INSTRUCTIONS

# PART 2- CAMPAIGNING FOR OR HOLDING ELECTIVE POLITICAL OFFICE:

## PART 2.a. - CAMPAIGNING

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### PART 2 b. - ELECTED TO OFFICE

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# PART 3- SIGNATURE AND DATE:

By my signature below, I a mmy understanding of University and SDBOR policies applicable to Polit cal Act vit es and Conflicts of Interest, and I further a mm the above informat on is correct and complete to the best of my knowledge as of the date entered below. I understand that I have a continuing obligat on to not fy the University of any changes to the above informat on.

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# RESPONSE OR RECOMIMENDATION FROM SUPERVISOR:

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0 œ Use Only – Date Reœived: