## Appeals Request Form For Use By: Charted Student Organizations

Name of Organization	
Phone:	Email:
	n session ot in session (i.e. Winter Break, Summer) any information provided to you from the first appeal)
☐ The decision of the Event Plannin	ng Manager regarding co-sponsorship status ng Manager regarding an exemption request
- · · · · · · · ·	decision. You may attach one (1) additional page if rmation supporting your appeal to this document.
Name:Authorized officer filing appea	Date:
Signature:	
Student Union Building Scheduling Offic  Overturned (Overruling the previous of Upheld (Supporting the previous of Name:	ous decision)