

## **Committee Application Form**

Please complete and return this form to Alan Honey, Governance Advisor, in Room 7-292 (CCC) or via email at HoneyA@macewan.ca

Student Name:		_
Student ID #:		_
Student Email:		_
Student Phone #:		<u> </u>
Committee(s) Applied for:		
Please tell us why you would like to v		
l,	, authorize SAMU to confirm my n	nembership through
official MacEwan University records.		
Signature of Applicant:		
Date:	<del></del>	
For Office Use Only		
Date Received:	<del></del>	
Received by:		