



Please fill out and return by email to:
GSA.Membership@austin.utexas.edu

I. General Information

<input type="text"/>	<input type="text"/>	<input type="text"/>
Full Name	Email address	UT EID

II. Constituency

<input type="text"/>	<input type="text"/>
College/School	Department
<input type="text"/>	
Graduate Program	

III. Position

Primary Representatives are voting members of the assembly and represent the interests of graduate students in their field of study. If a primary representative is unable to attend an assembly meeting, it is the primary representative's duty to arrange for the alternate representative to attend in the primary's place. Alternate representatives may only vote if the primary representative is absent.

Primary Representative Alternate Representative

IV. Membership Certification Statement

I, _____, (Full Name), certify that I am the duly elected or appointed representative for the constituency named above.

I authorize the Dean of Students' Office to verify my university academic and disciplinary records.

_____ Signature _____ Date

V. Election Certification

To be filled out by Graduate Coordinator/Advisor

As acting: Graduate Coordinator
 Graduate Advisor

I certify that this student is the representative for this graduate program, department, or university center.

<input type="text"/>	<input type="text"/>	<input type="text"/>
Name of Certifier	Signature	Date



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VI. Statement on Commitment to Service

I have read and understand the responsibilities of a department representative to the Graduate Student Assembly, as listed below.

- (1) I will attend the regular and special meetings of the Assembly as announced by the executive team.
- (2) If I am unable to attend a meeting, I will notify both the Membership Director (GSA.membership@Austin.utexas.edu) and my alternate prior to the meeting in which I will be absent.
- (3) I will report the content of meetings to my department or program and will solicit feedback from the same in a timely manner.
- (4) I will represent the interests of all graduate students in your constituents and will not let my personal interests, opinions, or beliefs interfere with that duty.
- (5) I will avoid any conflicts of interest or commitment between my employment and my duties as a department representation.
- (6) I will make a diligent effort to find a replacement for my position if I can no longer fulfill my GSA responsibilities and duties.
- (7) I will be readily accessible and available to other GSA members and to my constituents.
- (8) I will participate and encourage participation in GSA functions, events, committees, and meetings by graduate students both in and outside of my constituency.

By signing my name, I agree that I will fulfill these duties to the best of my ability for the duration of my term as a department representative.

Full Name

Signature

Date