

The Graduate School and University Center The City University of New York 365 Fifth Avenue New York, NY 10016-4309 TEL 212.817.8615 FAX 212.817.1530

GRADUATE COUNCIL ATLERNATE FORM

DSC Representatives: Complete and sign this form and present it at the sign-in table for Graduate Council to receive your ballot.

Under the provisions of Section 2.1.E.2 of the Bylaws of Graduate Council,	
I,NAME	, am a DSC representative
from the graduate program inPROGRA	and am serving as a
voting alternate for my program's Graduate Council student representative,	
GRADUATE COUNCIL STUDENT REPRESENTATIVE	, who is unable to attend this,
the, meeting of Gradua	ate Council.
SIGNATURE	