BUSU Election Appeal Form

Date Submitted:_____

Name:_____ Student #:_____

Returning Officer's ruling being appealed:

_____
_____
_____

Reason for the appeal, including specifically any errors in interpretation or application found in ruling:

_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____

Ruling sought from the ERDIE Board:

_____
_____
_____
_____

Office Use Only

Appeal Reference Number: 202_-___