McNeese State University Faculty Senate Proxy Form

APPOINTMENT OF PROXY SENATOR

I hereby designate and appoint		to serve as my alternate
and proxy at a meeting of the Fa	aculty Senate of McNeese S	State University to be held on
	20, or any adjournme	nt thereof.
l,	, shall be un	able to attend the meeting due to
		·
I certify that the named alterna	te is a full-time member of	the faculty of the College I represent.
Date	(Signature of Se	nator granting proxy)
College	(Print name of	Senator granting proxy)
Approval of Proxy		
President of Faculty Senate	·	