



Concordia University of Edmonton

# Students' Association

## CSA Faculty Advisor Application

Club/Union Name .....	Faculty: .....
	(if applicable)
Date Requested: .....	

I agree to abide by all of the By-Laws set forth by the CSA. I read and agree to the CSA Club/Union Policy.

Faculty Advisor position at CUE .....

Name .....

Signature .....

Club/Union executive signatures .....

CUE VP Student Life Signature .....

Approval Signatures: (2 out of 3)

\_\_\_\_\_  
CSA Executive Director

\_\_\_\_\_  
CSA VP of Finance

\_\_\_\_\_  
CSA President

Date approved: .....