

**Graduate Program Contact Information**  
**2008-2009 Information**  
(please type or print neatly)

College: \_\_\_\_\_ Department: \_\_\_\_\_

**Person to whom to address administrative issues (such as senate elections)**

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Office Address: \_\_\_\_\_

Office Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Preferred means of communication: \_\_\_ Phone \_\_\_ Email \_\_\_ Campus Mail

**Person who can forward information/announcements to graduate students**

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Office Address: \_\_\_\_\_

Office Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Preferred means of communication: \_\_\_ Phone \_\_\_ Email \_\_\_ Campus Mail

**Graduate Department Organization (if any):**

Full Name: \_\_\_\_\_

Abbreviation: \_\_\_\_\_

Office Address: \_\_\_\_\_

Office Phone: \_\_\_\_\_

Preferred means of communication: \_\_\_ Phone \_\_\_ Email \_\_\_ Campus Mail

Department Organization email address: \_\_\_\_\_

\*\*Please return this form to the Graduate and Professional Student Senate Office, West Office Space, Center Office.