

Student Leadership & Development

EO 1068 Compliance: Alcohol Education Presentation

Name of Organization: _____

Date Presentation Conducted: _____

Time Presentation Conducted: _____

Location Presentation Conducted: _____

President Name: _____

President Phone Number: _____

President Email Address: _____

Presenter Name: _____

Presenter Position Title: _____

By signing this form, I acknowledge that I have received information related to policies, expectations, and information on alcohol use/abuse related to the requirements of Executive Order 1068.

First and Last Name

Student ID #

Email Address

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