

Change of Registered Independent Student Organization (RISO) Representatives Form

READ: Identify below the new authorized representative(s) for your organization and the former representative to be replaced. Indicate if the new authorized representatives will be the new main contact persons to circle primary or secondary contact person or N/A as not applicable. Of those identified as main contact persons, they agree to the release of his/her name, address, phone, and email address to persons seeking contact with your RISO. This includes authorizing the use of information to share with interested students on the RISO website or any other listing provided by the Office for Student Services and Enrollment Management.

<p>New Authorized Representative #1</p> <p>Name: _____</p> <p>Email: _____@hawaii.edu Phone: _____</p> <p>Main Contact Person (circle): Primary Secondary N/A</p> <p style="text-align: center;">Replaces Former Representative</p> <p>Name: _____</p>	<p>New Authorized Representative #2</p> <p>Name: _____</p> <p>Email: _____@hawaii.edu Phone: _____</p> <p>Main Contact Person (circle): Primary Secondary N/A</p> <p style="text-align: center;">Replaces Former Representative</p> <p>Name: _____</p>
<p>New Authorized Representative #3</p> <p>Name: _____</p> <p>Email: _____@hawaii.edu Phone: _____</p> <p>Main Contact Person (circle): Primary Secondary N/A</p> <p style="text-align: center;">Replaces Former Representative</p> <p>Name: _____</p>	<p>New Authorized Representative #4</p> <p>Name: _____</p> <p>Email: _____@hawaii.edu Phone: _____</p> <p>Main Contact Person (circle): Primary Secondary N/A</p> <p style="text-align: center;">Replaces Former Representative</p> <p>Name: _____</p>
<p>New Authorized Representative #5</p> <p>Name: _____</p> <p>Email: _____@hawaii.edu Phone: _____</p> <p>Main Contact Person (circle): Primary Secondary N/A</p> <p style="text-align: center;">Replaces Former Representative</p> <p>Name: _____</p>	<p>New Authorized Representative #6</p> <p>Name: _____</p> <p>Email: _____@hawaii.edu Phone: _____</p> <p>Main Contact Person (circle): Primary Secondary N/A</p> <p style="text-align: center;">Replaces Former Representative</p> <p>Name: _____</p>

Acknowledgement and Agreement

Our RISO agrees to follow all rules and regulations as stated in the Registered Independent Student Organizations Handbook and any other applicable University policies and procedures. We certify that each representative listed complies with federal and state laws which prohibit discrimination in University programs and activities, including but not limited to the following laws: Title VI of the Civil Rights Act of 1964, as amended (race, color, national origin); Age Discrimination Act of 1975 (age); Title VIII of the Public Health Service, as amended (sex); Title IX of the Education Amendments of 1972 (sex, blindness, severely impaired vision); and Section 504 of the Rehabilitation Act of 1973 (disability); Americans with Disabilities Act.

Authorized Representative Approving Change:

Print Name

Signature

Date