Board Member Name: _______________________________
Date: __________________

I. Meetings Attended:          Date Attended:

- Board of Directors Meeting
- ASI Committee Meeting
- Club Meeting (Attach “Club Meeting” Form)
- Campus Committee Meeting (Attach “Campus Committee Meeting” Form)
- Dean/Department Chair Meeting (Attach “Dean/Department Chair Meeting” Form)

II. Office Hours: (Check box(es) that apply):

☐ ASI Event/Activity
  *Please fill out the bottom section

☐ Tabling
  (Exec Initial Required) ________

☐ Student Survey/Concern/Issues
  *Please fill out the bottom section

☐ Posters/Flyers/etc.
  Design
  (Exec Initial Required) ________

*Please explain the event/activity you attended and how you contributed to the event. If you collected student surveys or informed students about an ASI related event/services, please write down what was discussed. (3 – 4 sentences)

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Date Submitted: _________________
Received by Office Staff: ___________________________
Reviewed by Committee Chair: ________________________
Reviewed by Executive Vice President: _________________  Approved  Not Approved
Corrections Needed:

Approved by Executive Director: _______________________

ASI
Event/Activity
(Exec Initial Required)  ________

Total Number of Hours Completed:  

Students Working for Students