# Committee Representative Report Form

*All forms must be typed and e-mailed to your Direct Report and VPAG within 72 hours of the meeting. A.S.I. Members must attach a copy of the report to their Bi-Weekly. Please submit earlier if urgent issues are being discussed.*

 Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Submittal: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Committee: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Meeting: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Committee Chair: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**I. Have you included a copy of the agenda and minutes?** **[ ]  Yes** **[ ]  No**

**II. Topics discussed at committee meeting:**

1. **Recommendations and direction of the Committee:**

**IV. Your recommendations on the behalf of Cal State LA students:**

**V. Supplemental Information**

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**VVI. Next Steps/Support Requested**

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