



## Bi-Weekly Report

*Bi-Weekly Reports are due on Wednesday by NOON before a Board of Directors Meeting.*

**Name:** \_\_\_\_\_ **Position:** \_\_\_\_\_  
**For Work**  
**Completed between:** \_\_\_\_\_ **&** \_\_\_\_\_

**Please respond to the questions below (minimum 3 sentences). Your Direct Report will be verifying your report with the ASI Secretary Treasurer and provide feedback at your next one-on-one meeting.**

- 1. How did you complete your specific duties during this period in relation to the ASI policy? Please provide detail regarding the project(s) are you currently working on?**

- 2. What did you learn during this biweekly period? Do you have any comments or concerns that ASI can follow up on?**

3. Which events did you attend this biweekly period? Do you have any announcements you would like to share regarding the events attended?

4. What are your goals for the next bi-weekly period?

**For Office Use Only:**

Authorized Signatures

Signature for Approval

Date of Signature

Direct Report

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Secretary/Treasurer

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ASI President

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