



Student Perspective on Shared Governance:

The purposes of the Associated Students, Inc. shall be to ensure student input into the governance of the campus: provide an official voice through which student opinion may be expressed. Through the collective involvement of student government, administrative, and faculty the spirit of true and authentic shared governance will be realized.

Shared Governance Committee Appointee Duty Verification Request Form 2016-17

This form is to be used by committee appointees to secure verification that they have satisfied all necessary requirements for the quarter served. Once all verification and signatures are secured, please **submit the documents noted below to the A.S.I. Administrative Office, U-SU Room 203 between 8 am – 6 pm M-F last Friday before finals week.** If you have questions please call 323-343-4778.

Committee Member's Name: _____ **Date:** _____

Cal State LA E-mail: _____

Committee Name: _____

Semester Served: Fall Spring

Incentive Request: Barnes and Noble Card
 Visa Card **

My signature below signifies that I have attended required meetings, submitted reports, and actively participated in the process of Shared Governance at Cal State LA ensuring that the student voice was expressed in voice and action.

Name: _____ Signature: _____ Date: _____

Dear Committee Chairperson,

This memo serves, as verification that the student committee member above has fulfilled their duties on the stated committee for the quarter indicated. Please signify if all requirements were met below:

Satisfied Not Satisfied # of meetings this semester: _____

COMMENTS (optional): _____

Committee Chair: _____ Date: _____

Name (print)

Signature: _____

For A.S.I. Official Use Only:

Amount Approved: \$ 25 per meeting per semester + attendance at ALL SGC meetings

**** NOTE: (A.S.I. incurs an activation fee from Visa)**

Vice President for Academic Governance: _____

Print Name

Date: _____

Signature