Committee Attendance Tracking Form

Associated Students, Mt. San Antonio College

Student Name: _____ Semester: _____

Student ID #: _____ Committee Name: _____

Section below is for Committee Chair use only:

Committee Chair: _____ Date: _____ Extension: _____
(Please Print)

Signature: _____ E-mail: _____

Meeting Date	Time	Location	Committee Chair's Signature

I understand that failure to attend assigned committee meetings may result in my priority registration privileges being revoked (A.S. Officers only) and in zero credit for my committee service on my Student Activities Transcript. By signing below I acknowledge these terms and commit to attending the meetings scheduled for this committee.

Signature: _____ Date: _____

GJQ - 2/11/26