Basic Skills Learning Communities: Weekly Attendance Reports

Cohort Lead Name: ____________________________  Learning Community / Program Name: _________________

Week/Date of Meeting: ______________  Times: ______________  Location: ______________

At this meeting, the following items were discussed (please check all that apply):

☐ student progress  ☐ student challenges/interventions  ☐ other:

☐ upcoming class  ☐ curriculum integration

Cohort Lead: ► Please write all cohort faculty members’ names (including your own) in the left hand column below, and collect original signatures from those present at this week’s meeting. ► If a member is absent, his/her name should still be included in the left hand column albeit with the signature area left blank. ► Faculty receiving 0.5 coordination units are required to attend weekly meetings; faculty receiving less units are required to attend some, but not all, meetings; faculty not receiving units are encouraged, but not required, to attend weekly meetings. ► Forward completed reports to the Learning Communities Coordinator.

LEAD: LIST NAMES OF ALL FACULTY MEMBERS WHO ARE PART OF THIS LC: ____________________________

FACULTY SIGNATURE (IF PRESENT AT MEETING): ____________________________

RECEIVING COORD. UNITS?

YES  NO

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________________________________

________________________________

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FACULTY SIGNATURE (IF PRESENT AT MEETING): ____________________________

RECEIVING COORD. UNITS?

YES  NO

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Submit this form (front & back) once you have completed 4 weekly meetings