

MEETING ATTENDANCE RECORD

GL or Item #:	GL or Item #:
Funder:	Funder:
Fund #:	Fund #:
Program:	Program:
Project:	Project:
Name:	Name:
Date:	Date:

Date:	Name of Group Meetir	ng:					
Start Time:	End Tim	ne:		 _			
LAST NAME		FIRS	Т NAME	FP	SP	MEETING HOURS	ADMIN HOURS

pproved by: Chair or designated stan	
ame:	
gnature:	

Submit to:

 $Administrative\ Coordinator: \underline{northshore@nsdivision.ca}$

 $\textbf{Note:} \ \ \textbf{This form is to be used for meeting attendance hours only}$

All other activities are to be submitted on an activity invoice

Meeting hours include meeting attendance only AND Chair or committee member time spent in related meetings (ie. with staff) before or after ctte meetings. Meeting administration is for extra time spent with staff prior to or after the meeting