

### MEETING ATTENDANCE RECORD

Date: \_\_\_\_\_ Name of Group Meeting: \_\_\_\_\_

Start Time: \_\_\_\_\_ End Time: \_\_\_\_\_

LAST NAME	FIRST NAME	SIGNATURE	GP	SP	MEETING HOURS	ADMIN HOURS	MSP#	Address if not on file

Approved by: Chair or designated staff

\_\_\_\_\_  
Name:

\_\_\_\_\_  
Signature:

Submit to:

Administrative Coordinator: [northshore@divisionsbc.ca](mailto:northshore@divisionsbc.ca) / Fax: 778.730.0630

**Note:** 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 (i.e. with staff) before or after ctte meetings.

Meeting administration is for extra time spent with staff prior to or after the meeting