**(NAME OF ORGANIZATION)**

**Accomplishment Report**

\_\_\_ Semester

A.Y. \_\_\_\_\_\_\_\_

**SUMMARY OF ACTIVITIES**

**(\_\_\_\_ SEMESTER A.Y. \_\_\_\_\_\_\_\_\_\_)**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **NAME OF ACTIVITY** | **DATE** | **VENUE** | **INVOLVEMENT**Put check (√) in the appropriate column | **EXTENT OF BENEFITS**Put check (√) in the appropriate column | **LEVEL**Put check (√) in the appropriate column |
| **As Organizer/****Coordinator** | **As Participant** | **University/ College/ Community** | **1 or 2 departments** | **International** | **National** | **Regional** | **Local** |
| 1 |  |  |  |  |  |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |  |  |  |  |  |
| 4 |  |  |  |  |  |  |  |  |  |  |  |
| 5 |  |  |  |  |  |  |  |  |  |  |  |
| 6 |  |  |  |  |  |  |  |  |  |  |  |
| 7 |  |  |  |  |  |  |  |  |  |  |  |
| 8 |  |  |  |  |  |  |  |  |  |  |  |
| 9 |  |  |  |  |  |  |  |  |  |  |  |
| 10 |  |  |  |  |  |  |  |  |  |  |

 *\*add additional rows (if necessary)*

Prepared by: Reviewed by: Approved:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Secretary/ Records Officer President/ Governor Adviser*

**Activity No.** \_\_\_\_\_

**Name of Activity:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Venue:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |
| --- |
| **Involvement:** *As Organizer/Coordinator* *As Participant* |
| **Level:** *International Regional* *National Local* |
| **Extent of Benefits:** *College/University/Community 1 or 2 Departments* |

|  |
| --- |
| **NARRATIVE DESCRIPTION/ OBJECTIVE OF THE ACTIVITY***(Use separate sheet if narrative requires additional space)* |
|  |

**Required Attachment:**

* Approved Accomplished Activity Form