

FACULTY SENATE COMMITTEE REPORT

Date:

Committee:

Committee Chair:

Submitter:

Submitter's email:

Activities since last Steering committee meeting (example – number of meetings/recommendations)

Is there information that you need to bring to Steering committee's Attention?

☐ Yes ☐ No (If no, your report will be placed on the **Consent Agenda**)

If Yes, and you wish the report to be on the full agenda; are you seeking

☐ Discussion ☐ Direction ☐ Other

If you are requesting a Full Agenda item, please briefly summarize any additional concerns you have for the steering committee's consideration: