1.	Council	Committee: Senate	Joint	Presidential	
2.	Council or Committee Na	me:			
3.	3. Responsibilities (charge of the council/committee):				
4	Members:				
-	Name	Council/Committee Office	Type of membership	Meetings attended	
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5.	Dates Council or Committee	tee met:			
6.	6. Agenda for past year:				
7.	7. Achievements (Goals met):				

8.	Obstacles to meeting agenda of past year:
9.	Has there been any conflict or redundancy between the activities of your Council or Committee and those of the other Councils or Committees?  No.  Yes If yes, please specify the Council(s) or Committee(s):
10.	Has the Council or Committee submitted an annual report in the past 12 months?  No. If not, why?  Yes. If so, to whom was this submitted?
11.	Has the Council or Committee submitted any other reports in the past 12 months?  No.  Yes. If so, what issues were addressed?
12.	Did the Council or Committee make any recommendations to the Senate during the last year?  No.  Yes. If yes, were appropriate actions taken to follow up on your recommendations?
13.	Possible issues for subsequent review period: