

RA Program Attendance Form

Program Name: _____ Date: _____

RA Name: _____ RA's Hall: _____

	Name (Print)	ID Number	Signature
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Your attendance at this and other RA programs will added to your residential transcript. Upon request (allow one week processing time) a listing of all RA programs you have attended will be printed for you to demonstrate your involvement in campus life. This information is protected by federal law and will not be released to outside persons or agencies without your consent.