



AAC Peer Advisement Program

Date: ____/____/____

Club: _____

Semester/Year: _____

Date of event: _____

Event Contact Person

Name: _____

Email: _____

Person completing this form _____

Email: _____

Did you request funding for this event? If so, please include the reading number. _____

What type of event was held?

How did you ensure that the program was open to the entire campus?

Signature of Peer Advisement Coordinator or AAC Executive Board Member who attended:

Date: _____

For the use of AAC only
Received:

- Did you remember?**
- Summary
 - Copy of flyer
 - Signature of person who attended event

*****Please attach a brief summary of the event and a copy of your flyer/advertisements*****