

**SOUTH CAROLINA STATE UNIVERSITY**  
**ORANGEBURG, SOUTH CAROLINA**

**REPORT ON PROFESSIONAL MEETINGS ATTENDED WITH TITLE III FUNDS**

Name of Title III Activity Personnel Traveling \_\_\_\_\_

Name of Title III Activity Represented \_\_\_\_\_

Date Form Completed \_\_\_\_\_

Conference, Workshop, Institute, etc. attended \_\_\_\_\_

Sponsoring Organization \_\_\_\_\_

Subject of Meeting \_\_\_\_\_

Site of Meeting \_\_\_\_\_

Date(s) \_\_\_\_\_

*Please attach any relevant material associated with the meeting (i.e. programs/agenda, circulars, etc.)*

Indicate any and all individual meetings, caucuses, sessions attended:

Briefly summarize any and all related points/information that would benefit the development and continued promulgation of the Title III program specifically, and the University generally.

**EVALUATION OF THE MEETING**

Excellent [ ]    Good [ ]    Fair [ ]    Poor [ ]

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**Source of Funds:** (Indicate account number)

Federal (Title III) \_\_\_\_\_ Institutional \_\_\_\_\_ Other \_\_\_\_\_

\_\_\_\_\_  
Title III Director