**ANNUAL STUDENT ACTIVITY COMMISSION REPORT**

|  |
| --- |
| Institution  **Najran University** |
| College/ Department |
| **Year and semester to which this report applies** |
| **Location (if not on main campus) (M/F)** |

1. **Summary of students activity**

|  |  |
| --- | --- |
| * Number of activity during academic year | ……… |
| * Number of students participated in these activities | ……… |

1. **Students' activity details during current year**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **No.** | **Activity title** | **Participants Number** | **Semester & date of activity** | **Students opinion about the activity (Negative, Positive)** | **Activity supported by the university or third-part** | **Activity type (sport, social, cultural, .....)** |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |

1. **The number of activities have been planned and were not implemented**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **No.** | **Activity title** | **Expected Participated Number** | **Semester and date** | **The reason of not implementing the activity** | **Is the activity supported by the university or third-party** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

1. **The number of participants who received awards / certificates during activity**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **No.** | **Activity title** | **The names of students who received a certificate or award** | **Students ID** | **Student level** | **Awards were supported by the university or third-party** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

* **Students most important notes about activities**
* **The annual needs for the student activity Commission's**
* **Activities proposals for the next year**
* **A summary of what has been updated in the website**

1. **Policies and Procedures**

|  |  |  |
| --- | --- | --- |
| **D.1. Number of available policies** | ………………………. | |
| **D.2. Statement of adopted policies only** | **Policy title** | **The level of policy activation (High, Medium, low or None)** |
| **………………………………………………………………** | ………………………. |
| **………………………………………………………………** | ………………………. |
| **………………………………………………………………** | ………………………. |
| **D.3. Improvement plan for policies** | **Statement of policies with low or none level of activation** | **Summary of planning Action** |
| **………………………………………………………………** | ………………………. |
| **………………………………………………………………** | ………………………. |
| **………………………………………………………………** | ………………………. |
| **………………………………………………………………** | ………………………. |

|  |  |  |
| --- | --- | --- |
| **Report complete by**: | **Signature** | **Date Report Completed** |
|  |  |  |
| **Approval of Measurement and Evaluation Committee by (if required):** | **Signature** | **Date** |
|  |  |  |
| **Department Council approval No:** | **Head of Department Council** | **Date** |
|  |  |  |

Note: all above signature are not required if report send by electronic administrative transactions