



EXTENDED OPPORTUNITY PROGRAMS & SERVICES

EOPS Workshop Attendance Verification Form

Please return this signed form to the EOPS Office by: Email: eopsoffice@msjc.edu |
In Person: San Jacinto Campus (Room 1113) or Menifee Valley Campus (Bldg. 250)

Student Information:

Full Name: _____

Student ID #: _____

Semester: _____

Workshop Information:

Workshop Title: _____

Date of Workshop: _____

Workshop Host/Department: _____

Host Verification:

I confirm that the above-named student attended the workshop listed above.

Host Name (Print): _____

Host Signature: _____

Date: _____

Office use only

Date Received: _____ Staff Initials: _____