

2020 ASTM International Certificate of Attendance



Name _____

Company _____

Committee _____

Dates _____

Please take this completed document to the ASTM Registration Desk for a Stamp of Approval.
 This document is a self-reporting form.
 ASTM does not verify the accuracy of the self-reported information.
 This information can be supplemented by including minutes and agendas.

	Date	Meeting Designation	Description of Items Discussed	Hour(s)
1.	_____	_____	_____	_____
	Signature of Meeting Chair _____			_____
2.	_____	_____	_____	_____
	Signature of Meeting Chair _____			_____
3.	_____	_____	_____	_____
	Signature of Meeting Chair _____			_____
4.	_____	_____	_____	_____
	Signature of Meeting Chair _____			_____
5.	_____	_____	_____	_____
	Signature of Meeting Chair _____			_____
6.	_____	_____	_____	_____
	Signature of Meeting Chair _____			_____

Signature _____ Date _____

Total Hours _____



ASTM Stamp of Approval