



# PROVOST MEETING BRIEFING MEMORANDUM

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DATE:  
LOCATION:

TIME:

PHONE:

(AT LOCATION)

PURPOSE:

ATTENDANCE:

UNIVERSITY STAFF CONTACT    Name:  
   Title:  
   Office Phone:  
   Home Phone:  
   Cell Phone:

LOCATION CONTACT                Name:  
   Title:  
   Office Phone:  
   Home Phone:  
   Cell Phone:

INTENDED ATTACHMENT LIST 

- DISCUSSION POINTS
- BACKGROUND INFORMATION
- DONOR REPORT