Course:
Date:
Instructor(s):
Location:

A sign-in sheet is required for each day of instruction. Day _____ of ____

Name (Please Print Clearly)	Signature	Email Address
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		

	I certify that the students who signed their name above were in attendance for the entire duration of the above-listed course.				
Page of		Date:	_/	_/	
	Instructor Signature:				

A sign-in sheet is required for each day of instruction.	Day	of
--	-----	----

Date: _____/_____

Name (Please Print Clearly)	Signature	Email Address	
11.			
12.			
13.			
14.			
15.			
16.			
17.			
18.			
19.			
20.			
21.			
22.			
23.			
24.			
25.			
I certify that the students who signed their name above were in attendance for the entire duration of the above-listed course.			

Instructor Signature: _____

Page _____ of ____

A sign-in sheet	is required fo	r each day of instruction.	Day	of

Date: _____/_____

Name (Please Print Clearly)	Signature	Email Address	
26.			
27.			
28.			
29.			
30.			
31.			
32.			
33.			
34.			
35.			
36.			
37.			
38.			
39.			
40.			
I certify that the students who signed their name above were in attendance for the entire duration of the above-listed course.			

Instructor Signature: _____

Page _____ of ____