



Vocational Academic Timesheet

Customer Name: _____ ID #: _____

School: _____ Course of Study: _____

As a participant in a vocational/academic program you are required to attend classes for the hours assigned and submit documentation of attendance and supervised study time to your Career Specialist. Please have your instructor(s) record your hours of attendance and supervised study time below. Return the completed timesheet to your Career Specialist no later than ____/____/____ at 4:00 p.m.

If you have any questions or concerns - contact _____ at _____ - _____.

This timesheet will document attendance between the dates of ____/____/____ and ____/____/____.

ATTENDANCE SHEET MUST BE SUBMITTED MONDAYS BY 4:00PM

TO BE COMPLETED BY THE INSTRUCTOR(S). Please record comments on reverse of form.

Classes	Mon	Tue	Wed	Thur	Fri	Sat	Sun	Total	Instructor's Signature/Date
Class 1									
Class 2									
Class 3									
Class 4									
Class 5									
Class 6									
								Total	

Classes	Mon	Tue	Wed	Thur	Fri	Sat	Sun	Total	Instructor's Signature/Date
Class 1									
Class 2									
Class 3									
Class 4									
Class 5									
Class 6									
:								Total	

I certify I have attended the classes as indicated above.

Customer's Signature _____ Date _____

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