



# Class Attendance Sheet

Title of Class: \_\_\_\_\_

Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_ Start Time: \_\_\_\_\_ End Time: \_\_\_\_\_

Total Number of Contact Hours: \_\_\_\_\_ Total Number of CEU's; \_\_\_\_\_

Instructor(s) and Work Phone Numbers: \_\_\_\_\_

Location: \_\_\_\_\_  
City/State Building Room Number

Print Full Name	Agency Email Address	Signature (As required)