

ATTENDANCE FORM

School:		Grade:		Start Time:		Begin Date:		Presenter(s):		Classroom Teacher(s):		Grant Agency:	OAHC
School District:		Period:		End Time:		End Date:						Region:	4
City:		Blocked?		Minutes:		Curriculum (RUC or CSR):						Subcontractor:	ENLC
County:				# of Sessions:		Total MS Magazines Distributed:						Program Type:	ICAC

Classroom Teacher or Students fill in student names and ages (see sample at top of student name column). Put a #1 in the column of Age. Put a #1 for appropriate ethnicity.

Put a #1 for each day attended presentation. Use this same form for all days of the presentation, adding students to the bottom who come after Day 1.

Agency will calculate totals.

SAMPLE:		Age													Ethnicity						Dates of Presentation					Total Days Attended	
First name & last initial	Female	10	11	12	13	14	15	16	17	18	19	Other	White	African American	Asian	Hispanic	Native American	Native Hawaiian	Other	11/5	11/6	11/7	11/8	11/9			
Jennifer S	Female			1												1					1			1	1	1	4
Jessica J	Female		1										1								1	1	1	1	1		5
Student Name	Female Only	Age													Ethnicity						Dates of Presentation					Total Days Attended	
		10	11	12	13	14	15	16	17	18	19	Other	White	African American	Asian	Hispanic	Native American	Native Hawaiian	Other	8/28	8/29	8/30	8/31	9/1			
1	Female																										
2	Female																										
3	Female																										
4	Female																										
5	Female																										
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20	Female																										
21	Female																										
22	Female																										
23	Female																										
24	Female																										
Totals																											
Teacher(s)	Female																										
Other Adult	Female																										
Other Adult	Female																										