



Adult Education & Literacy Program Student Sign-In Sheet

Assessment

Instruction

Class Name: _____ **Class Location:** _____

Class Number: _____ **Date:** _____

Please preprint names clearly.

	Name	Signature	Time Arrived	Time Departed
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				
16				
17				
18				
19				
20				
21				
22				
23				
24				
25				

Instructor Name

Instructor Signature