

ATTENDANCE SHEET

■SECTION I (To be completed by the student)

Name of Student: _____ Home Tel: _____

Cell-phone: _____

Home Address: _____

Year/Department: _____ Student ID No: _____

Name of establishment attached (Assigned Company)/Department: _____

Mo.	Date	Day of the Week	Signature of Student
Week1			

Mo.	Date	Day of the Week	Signature of Student
Week2			

Mo.	Date	Day of the Week	Signature of Student
Week3			

* Any Public Holidays, Medical Leaves, etc. should be recorded as such in the "Signature of Student" space.

I hereby declare that the information given in this document is true and accurate.

Signature of Student

Date

■SECTION II (To be completed by an officer in the Company)

The record of attendance above is certified correct by:

Name of Supervisor: _____

Title: _____

Signature: _____ Date: _____