

Participant Name				Phone #			
School/Trainin	g Site			Email Address			
Program of Stu	ıdy						
		SIGN IN	SIGN OUT	COURSE NAME	INSTRUCTORS SIGNATURE		
DAY	DATE	TIME	TIME	(EXPSYC 2103)	(No initials)		
Monday	1/3/2022						
Tuesday	1/4/2022						
Wednesday	1/5/2022						
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Monday	1/10/2022						
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Monday	1/31/2022					
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Sign/Date				Sign/Date		
Comments				Comments		



Comments

## **Attendance Sheet**

Submit by one of the following: Email: Support@threeriversrc.com (PDF Format Only) Fax:470-305-0302 (cover sheet required) Mail to: P.O. Box 97, Griffin, GA 30224 Hand deliver to: 1210 Greenbelt Drive, Griffin, GA 30224

Participant Name	Phone #
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School/Training Site				Email Address		
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Comments



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Program of Stu	udy						
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Sign/Date				Sign/Date			
Comments				Comments			
Somments							



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Participant Name				Phone #	Phone #		
School/Training Site		Email Address					
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Monday	3/14/2022				
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## STATEMENT OF UNDERSTANDING:

I certify that I have been in training, class, or clinicals as indicated above. I understand that submitting false information to obtain support is an act of fraud for which legal action may be taken. I will not receive support for online classes or remote attendance. I have notified my Career Facilitor of any changes that were made to my schedule. Attendance Sheets will not be processed if submitted seven or more days after the due date. I also understand that WorkSource Three Rivers is not responsible for items lost in the mail. If I fail to comply with any of the statements above, payment WILL BE DENIED.

PARTICIPANT SIGNATURE	DATE
FOR WIOA STAFF USE ONLY-I	DO NOT WRITE BELOW THIS LINE
Funding	Funding
Transportation days x 12.00 =  Childcare days x =	Transportation days x 12.00 =  Childcare days x =
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Participant Name Phone #					
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Wednesday	3/30/2022		+		
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		SIGN IN	SIGN OUT	COURSE NAME	INSTRUCTORS SIGNATURE
DAY	DATE	TIME	TIME	(EXPSYC 2103)	(No initials)
Monday	6/20/2022				
Tuesday	6/21/2022				
Wednesday	6/22/2022				
Thursday	6/23/2022				
Friday	6/24/2022				
Saturday	6/25/2022				
Sunday	6/26/2022				
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		SIGN IN	SIGN OUT	COURSE NAME	INSTRUCTORS SIGNATURE
DAY	DATE	TIME	TIME	(EXPSYC 2103)	(No initials)
Monday	6/27/2022				
Tuesday	6/28/2022				
Wednesday	6/29/2022				
Thursday	6/30/2022				
Friday	7/1/2022				
Saturday	7/2/2022				
Sunday	7/3/2022				
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School/Trainin	ng Site	Email Address				
Program of Stu	udy					
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DAY	DATE	SIGN IN TIME	SIGN OUT TIME	COURSE NAME (EXPSYC 2103)	INSTRUCTORS SIGNATURE (No initials)	
Monday	7/4/2022		Independe	nce Day		
Tuesday	7/5/2022					
Wednesday	7/6/2022					
Thursday	7/7/2022					
Friday	7/8/2022					
Saturday	7/9/2022		1			
Sunday	7/10/2022		1			
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		SIGN IN	SIGN OUT	COURSE NAME	INSTRUCTORS SIGNATURE	
DAY	DATE	TIME	TIME	(EXPSYC 2103)	(No initials)	
Monday	7/11/2022				· · · · · · · · · · · · · · · · · · ·	
Tuesday	7/12/2022					
Wednesday	7/13/2022					
Thursday	7/14/2022					
Friday	7/15/2022					
Saturday	7/16/2022					
Sunday	7/17/2022					
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Monday	7/18/2022		1	(	(ite illicials)
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Monday	7/25/2022				
Tuesday	7/26/2022				
Wednesday	7/27/2022				
Thursday	7/28/2022				
Friday	7/29/2022				
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Participant Na	me			Phone #	
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DAY	DATE	TIME	TIME	COURSE NAME (EXPSYC 2103)	(No initials)
Monday	8/1/2022			(	(ivo inicials)
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Wednesday	8/3/2022				
Thursday	8/4/2022		1		
Friday	8/5/2022		1		
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Total Support <i>i</i>	Authorized			Total Support Autho	orized
Sign/Date				Sign/Date	
Comments				Comments	<del></del>
Comments				Comments	



Submit by one of the following: Email: Support@threeriversrc.com (PDF Format Only) Fax:470-305-0302 (cover sheet required) Mail to: P.O. Box 97, Griffin, GA 30224 Hand deliver to: 1210 Greenbelt Drive, Griffin, GA 30224

A proud partner of the American	JobCenter network				
Participant Na	me			Phone #	
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		SIGN IN	SIGN OUT	COURSE NAME	INSTRUCTORS SIGNATURE
DAY	DATE	TIME	TIME	(EXPSYC 2103)	(No initials)
Monday	8/15/2022				
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DAY	DATE	TIME	TIME	(EXPSYC 2103)	(No initials)
Monday	8/22/2022				
Tuesday	8/23/2022				
Wednesday	8/24/2022				
Thursday	8/25/2022				
Friday	8/26/2022				
Saturday	8/27/2022				

## STATEMENT OF UNDERSTANDING:

8/28/2022

Sunday

I certify that I have been in training, class, or clinicals as indicated above. I understand that submitting false information to obtain support is an act of fraud for which legal action may be taken. I will not receive support for online classes or remote attendance. I have notified my Career Facilitor of any changes that were made to my schedule. Attendance Sheets will not be processed if submitted seven or more days after the due date. I also understand that WorkSource Three Rivers is not responsible for items lost in the mail. If I fail to comply with any of the statements above, payment WILL BE DENIED.

PARTICIPANT SIGNATURE	DATE
FOR WIOA STAFF USE ONLY-I	DO NOT WRITE BELOW THIS LINE
Funding	Funding
Transportation days x 12.00 =  Childcare days x =	Transportation days x 12.00 =  Childcare days x =
Total Support Authorized	Total Support Authorized
Sign/Date Comments	Sign/Date Comments



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Monday	8/29/2022				,
Tuesday	8/30/2022		1		
Wednesday	8/31/2022		1		
Thursday	9/1/2022		1		
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DAY	DATE	TIME	TIME	(EXPSYC 2103)	(No initials)
	9/12/2022				
,	9/13/2022				
	9/14/2022				
	9/15/2022				
·	9/16/2022				
	9/17/2022				
Sunday	9/18/2022				
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DAY	DATE	TIME	TIME	(EXPSYC 2103)	(No initials)
Monday	9/19/2022				
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Wednesday	9/21/2022				
Thursday	9/22/2022				
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Sign/Date				Sign/Date	



Comments

Submit by one of the following: Email: Support@threeriversrc.com (PDF Format Only) Fax:470-305-0302 (cover sheet required) Mail to: P.O. Box 97, Griffin, GA 30224

# Attendance Sheet Hand deliver to: 1210 Greenbelt Drive, Griffin, GA 30224

Participant Nar	me			Phone #			
School/Training	g Site			Email Ad	ldress		
Program of Stu	dy						
DAY	DATE	SIGN IN TIME	SIGN OUT	COURSE NAME (EXPSYC 2103)	INSTRUCTORS SIGNATURE (No initials)		
Monday	9/26/2022	TIIVIL	THVIL	(LX 51 C 2103)	(NO IIIItiais)		
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Tuesday Wednesday							
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Thursday			+				
Friday Saturday	9/30/2022 10/1/2022		+				
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Monday	10/3/2022						
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Wednesday	10/5/2022						
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Comments



Participant Na	me			Phone #		
School/Training Site				Email Address		
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Wednesday	10/11/2022		+			
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Monday	10/17/2022					
Tuesday	10/18/2022					
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Participant Na	me			Phone #		
School/Training Site				Email Address		
Program of Stu	ıdy					
DAY	DATE	SIGN IN TIME	SIGN OUT	COURSE NAME (EXPSYC 2103)	INSTRUCTORS SIGNATURE (No initials)	
Monday	10/24/2022	IIIVIL	TIIVIL	(LXF31C 2103)	(NO IIIItiais)	
Tuesday	10/24/2022					
Wednesday	10/26/2022					
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Friday	10/28/2022					
Saturday	10/29/2022					
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Monday	10/31/2022	TIIVIL	111112	(2/ 310 2103)	(NO IIIICIOS)	
Tuesday	11/1/2022					
Wednesday	11/2/2022					
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Attendance Shee	iance Snee	eτ
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Participant Na	me			Phone #		
School/Trainin	ıg Site			Email Address		
Program of Stu	udy					
	·			<del></del>		
		SIGN IN	SIGN OUT	COURSE NAME	INSTRUCTORS SIGNATURE	
DAY	DATE	TIME	TIME	(EXPSYC 2103)	(No initials)	
Monday	11/7/2022					
Tuesday	11/8/2022					
Wednesday	11/9/2022					
Thursday	11/10/2022					
Friday	11/11/2022					
Saturday	11/12/2022					
Sunday	11/13/2022					
**CO	MPLETE WITH	DARK INK	ONLY**	**NO WHITE OUT**	**NO PENCIL**	
		SIGN IN	SIGN OUT	COURSE NAME	INSTRUCTORS SIGNATURE	
DAY	DATE	TIME	TIME	(EXPSYC 2103)	(No initials)	
Monday	11/14/2022					
Tuesday	11/15/2022					
Wednesday	11/16/2022					
Thursday	11/17/2022					
Friday	11/18/2022					
Saturday	11/19/2022					
Sunday	11/20/2022					
vhich legal action m nade to my schedul	peen in training, cla nay be taken. I will r e. <b>Attendance She</b>	ot receive suppo ets will not be p	ort for online classe rocessed if submit	es or remote attendance. I have i	e information to obtain support is an act of fraud fo notified my Career Facilitor of any changes that wer te due date. I also understand that WorkSource Thr ment WILL BE DENIED.	
PARTICIPANT S	SIGNATURE _				DATE	
		FOR V	WIOA STAFF USE ONL	Y-DO NOT WRITE BELOW THIS LINE		
unding	<del></del>			Funding		
Transportation	1	days x 12.0	0 =	Transportation	days x 12.00 =	
Childcare		days x	_=	Childcare	days x =	
Fotal Support A	Authorized			Total Support Author	rized	
Sign/Date				Sign/Date		
Comments				Comments	<del></del>	
				30		



Participant NameSchool/Training Site				Phone # Email Address		
		SIGN IN	SIGN OUT	COURSE NAME	INSTRUCTORS SIGNATURE	
DAY	DATE	TIME	TIME	(EXPSYC 2103)	(No initials)	
Monday	11/21/2022					
Tuesday	11/22/2022					
Wednesday	11/23/2022					
Thursday	11/24/2022		Thanks	giving		
Friday	11/25/2022					
Saturday	11/26/2022					
Sunday	11/27/2022					
**COI	MPLETE WITH	DARK INK	ONLY**	**NO WHITE OUT**	**NO PENCIL**	
		SIGN IN	SIGN OUT	COURSE NAME	INSTRUCTORS SIGNATURE	
DAY	DATE	TIME	TIME	(EXPSYC 2103)	(No initials)	
Monday	11/28/2022					
Tuesday	11/29/2022					
Wednesday	11/30/2022					
Thursday	12/1/2022					
Friday	12/2/2022					
Saturday	12/3/2022					
Sunday	12/4/2022					
which legal action m made to my schedule	een in training, cla: ay be taken. I will r e. <b>Attendance She</b> e ible for items lost i	not receive suppo ets will not be p n the mail. If I fa	ort for online classe rocessed if submit	es or remote attendance. I have a ted seven or more days after th ny of the statements above, payi	e information to obtain support is an act of fraud for notified my Career Facilitor of any changes that were the due date. I also understand that WorkSource Three ment WILL BE DENIED.  DATE	
		FOR \	NIOA STAFF USE ONL	Y-DO NOT WRITE BELOW THIS LINE		
Funding				Funding		
Transportation days x 12.00 =			0 =	Transportation	days x 12.00 =	
Childcare		days x	_=	Childcare	days x =	
Total Support A	Authorized		_	Total Support Author	rized	
Sign/Date						
Comments				Comments		



Participant Name				Phone #		
School/Training Site				Email Address		
Program of Stu	ıdy					
		SIGN IN	SIGN OUT	COURSE NAME	INSTRUCTORS SIGNATURE	
DAY	DATE	TIME	TIME	(EXPSYC 2103)	(No initials)	
Monday	12/5/2022					
Tuesday	12/6/2022					
Wednesday	12/7/2022					
Thursday	12/8/2022					
Friday	12/9/2022					
Saturday	12/10/2022					
Sunday	12/11/2022					
**CO	MPLETE WITH	DARK INK	ONLY**	**NO WHITE OUT**	**NO PENCIL**	
		SIGN IN	SIGN OUT	COURSE NAME	INSTRUCTORS SIGNATURE	
DAY	DATE	TIME	TIME	(EXPSYC 2103)	(No initials)	
Monday	12/12/2022					
Tuesday	12/13/2022					
Wednesday	12/14/2022					
Thursday	12/15/2022					
Friday	12/16/2022					
Saturday	12/17/2022					
Sunday	12/18/2022					
which legal action m made to my schedul	oeen in training, cla lay be taken. I will r e. <mark>Attendance She</mark> sible for items lost i	not receive suppo ets will not be p n the mail. If I fa	ort for online classe rocessed if submit il to comply with a	es or remote attendance. I have ted seven or more days after the ny of the statements above, pay	e information to obtain support is an act of fraud for notified my Career Facilitor of any changes that were ne due date. I also understand that WorkSource Three ment WILL BE DENIED.  DATE	
Funding		FOR \	WIOA STAFF USE ONL	Y-DO NOT WRITE BELOW THIS LINE		
Transportation	1	days x 12.0	0 =	Transportation	days x 12.00 =	
Childcare		days x	=	Childcare	days x =	
Total Support A	Authorized			Total Support Autho	orized	
Sign/Date						
Comments				Comments		
Comments				Comments		



Sign   No   Sign   Sig	Participant Name				Phone #	
DAY   DATE   TIME   TIME   (EX.PSYC 2103)   (No initials)	School/Training Site				Email Add	lress
DAY   DATE   TIME   TIME   (EX.:PSYC.2103)   (No initials)	Program of Stu	ıdy				
Monday   12/19/2022			SIGN IN	SIGN OUT	COURSE NAME	INSTRUCTORS SIGNATURE
Tuesday   12/20/2022	DAY	DATE	TIME	TIME	(EXPSYC 2103)	(No initials)
Transport   12/21/2022	Monday	12/19/2022				
Thursday   12/22/2022	Tuesday	12/20/2022				
Saturday 12/23/2022  Sunday 12/25/2022  Sunday 12/25/2022  Sunday 12/25/2022  **COMPLETE WITH DARK INK ONLY**  **NO WHITE OUT**  **NO PENCIL**  DAY  DATE  TIME  TIME  TIME  TIME  TIME  COURSE NAME  (EX.PSYC 2103)  Monday 12/26/2022  Tuesday 12/27/2022  Wednesday 12/28/2022  Thursday 12/28/2022  Thursday 12/29/2022  Friday 12/30/2022  Saturday 12/31/2022  Sunday 1/1/2023  New Year's Day  **TATEMENT OF UNDERSTANDING: certify that I have been in training, class, or clinicals as indicated above. I understand that submitting false information to obtain support is an act of frauchish legal action may be taken. I will not receive support for online classes or remote attendance. I have notified my Career Facilitor of any changes that nade to my schedule. Attendance Sheets will not be processed if submitted seven or more days after the due date. I also understand that WorkSource tivers is not responsible for items lost in the mail. If I fail to comply with any of the statements above, payment WILL BE DENIED.  **PARTICIPANT SIGNATURE**  DATE  FOR WIOA STAFF USE ONLY-DO NOT WRITE BELOW THIS LINE  FUNDING  Funding  Transportation days x 12.00 =  Childcare days x =  Childcare days x =  Total Support Authorized  Sign/Date  Sign/Date	Wednesday	12/21/2022				
Saturday 12/24/2022   Christmas Day   12/25/2022   Christmas Day   **COMPLETE WITH DARK INK ONLY**   **NO WHITE OUT**   **NO PENCIL**    DAY DATE SIGN IN SIGN OUT COURSE NAME (No initials)   INSTRUCTORS SIGNATURE (No initials)    Monday 12/26/2022	Thursday	12/22/2022				
Sunday 12/25/2022   Christmas Day   **COMPLETE WITH DARK INK ONLY**   **NO WHITE OUT**   **NO PENCIL**    DAY DATE SIGN IN TIME TIME (EX.PSYC 2103)   INSTRUCTORS SIGNATURE (No initials)    Monday 12/26/2022	Friday	12/23/2022				
**COMPLETE WITH DARK INK ONLY**    SIGN IN   SIGN OUT   COURSE NAME   INSTRUCTORS SIGNATURE	Saturday	12/24/2022				
DAY DATE TIME TIME (EXPSYC 2103) INSTRUCTORS SIGNATURE (No initials)  Monday 12/26/2022 Tuesday 12/27/2022 Wednesday 12/28/2022 Thursday 12/29/2022 Friday 12/30/2022 Saturday 12/31/2022 Sunday 12/31/2022 Sunday 12/31/2023 New Year's Day TATEMENT OF UNDERSTANDING: certify that I have been in training, class, or clinicals as indicated above. I understand that submitting false information to obtain support is an act of fraucy which legal action may be taken. I will not receive support for online classes or remote attendance. I have notified my Career Facilitor of any changes that nade to my schedule. Attendance Sheets will not be processed if submitted seven or more days after the due date. I also understand that WorkSource tivers is not responsible for items lost in the mail. If I fall to comply with any of the statements above, payment WILL BE DENIED.  PARTICIPANT SIGNATURE  FOR WIOA STAFF USE ONLY-DO NOT WRITE BELOW THIS LINE  FUNDING  Funding  Funding  Transportation days x 12.00 = Transportation days x 12.00 =  Childcare days x = Childcare days x =  Total Support Authorized Sign/Date	Sunday	12/25/2022		Christma	as Day	
DAY DATE TIME TIME (EX.PSYC 2103) (No initials)  Monday 12/26/2022 Tuesday 12/27/2022 Wednesday 12/28/2022 Thursday 12/29/2022 Thursday 12/30/2022 Saturday 12/31/2022 Sunday 12/31/2022 Sunday 1/1/2023 New Year's Day TATEMENT OF UNDERSTANDING: certify that I have been in training, class, or clinicals as indicated above. I understand that submitting false information to obtain support is an act of frauc which legal action may be taken. I will not receive support for online classes or remote attendance. I have notified my Career Facilitor of any changes that value to my schedule. Attendance Sheets will not be processed if submitted seven or more days after the due date. I also understand that WorkSource takers is not responsible for items lost in the mail. If I fall to comply with any of the statements above, payment WILL BE DENIED.  PARTICIPANT SIGNATURE	**CO	MPLETE WITH	DARK INK	ONLY**	**NO WHITE OUT**	**NO PENCIL**
Monday 12/26/2022 Tuesday 12/27/2022 Wednesday 12/28/2022 Thursday 12/28/2022 Thursday 12/29/2022 Friday 12/30/2022 Saturday 12/31/2022 Sunday 1/1/2023 New Year's Day  TATEMENT OF UNDERSTANDING: certify that I have been in training, class, or clinicals as indicated above. I understand that submitting false information to obtain support is an act of frauchich legal action may be taken. I will not receive support for online classes or remote attendance. I have notified my Career Facilitor of any changes that valued to my schedule. Attendance Sheets will not be processed if submitted seven or more days after the due date. I also understand that WorkSource tivers is not responsible for items lost in the mail. If I fail to comply with any of the statements above, payment WILL BE DENIED.  PARTICIPANT SIGNATURE  FOR WIOA STAFF USE ONLY-DO NOT WRITE BELOW THIS LINE  Funding  Funding  Transportation days x 12.00 = Transportation days x 12.00 = Childcare days x = Total Support Authorized  Sign/Date Sign/Date			SIGN IN	SIGN OUT	COURSE NAME	INSTRUCTORS SIGNATURE
Tuesday 12/27/2022  Wednesday 12/28/2022  Thursday 12/29/2022  Friday 12/30/2022  Saturday 12/31/2022  Sunday 1/1/2023	DAY	DATE	TIME	TIME	(EXPSYC 2103)	(No initials)
Thursday 12/28/2022	Monday	12/26/2022				
Thursday 12/29/2022  Friday 12/30/2022  Saturday 12/31/2022  Sunday 1/1/2023 New Year's Day  TATEMENT OF UNDERSTANDING: Certify that I have been in training, class, or clinicals as indicated above. I understand that submitting false information to obtain support is an act of frauc which legal action may be taken. I will not receive support for online classes or remote attendance. I have notified my Career Facilitor of any changes that whade to my schedule. Attendance Sheets will not be processed if submitted seven or more days after the due date. I also understand that WorkSource tivers is not responsible for items lost in the mail. If I fail to comply with any of the statements above, payment WILL BE DENIED.  PARTICIPANT SIGNATURE  FOR WIOA STAFF USE ONLY-DO NOT WRITE BELOW THIS LINE  FUNDING  Funding  Transportation days x 12.00 =  Childcare days x = Childcare days x = Total Support Authorized  Fortal Support Authorized  Sign/Date  Sign/Date	Tuesday	12/27/2022				
Saturday   12/30/2022	Wednesday	12/28/2022				
Saturday 12/31/2022  Sunday 1/1/2023	Thursday	12/29/2022				
Sunday 1/1/2023 New Year's Day  TATEMENT OF UNDERSTANDING: certify that I have been in training, class, or clinicals as indicated above. I understand that submitting false information to obtain support is an act of frauc which legal action may be taken. I will not receive support for online classes or remote attendance. I have notified my Career Facilitor of any changes that what the processed if submitted seven or more days after the due date. I also understand that WorkSource it is not responsible for items lost in the mail. If I fail to comply with any of the statements above, payment WILL BE DENIED.  PARTICIPANT SIGNATURE	Friday	12/30/2022				
TATEMENT OF UNDERSTANDING: certify that I have been in training, class, or clinicals as indicated above. I understand that submitting false information to obtain support is an act of frauc which legal action may be taken. I will not receive support for online classes or remote attendance. I have notified my Career Facilitor of any changes that nade to my schedule. Attendance Sheets will not be processed if submitted seven or more days after the due date. I also understand that WorkSource itivers is not responsible for items lost in the mail. If I fail to comply with any of the statements above, payment WILL BE DENIED.  PARTICIPANT SIGNATURE  FOR WIOA STAFF USE ONLY-DO NOT WRITE BELOW THIS LINE  Funding  Funding  Transportation days x 12.00 = Transportation days x 12.00 = Childcare days x = Total Support Authorized  Total Support Authorized  Sign/Date  Sign/Date  Sign/Date	Saturday	12/31/2022				
certify that I have been in training, class, or clinicals as indicated above. I understand that submitting false information to obtain support is an act of frauctivitic false information to obtain support is an act of frauctivitic false information to obtain support is an act of frauctivitic false information to obtain support is an act of frauctivities in the mail information in the mail information of any changes that it is not responsible for items lost in the mail. If I fail to comply with any of the statements above, payment will be deate. I also understand that WorkSource it is not responsible for items lost in the mail. If I fail to comply with any of the statements above, payment will be deate. I also understand that WorkSource it is not responsible for items lost in the mail. If I fail to comply with any of the statements above, payment will be deate. I also understand that WorkSource it is not responsible for items lost in the mail. If I fail to comply with any of the statements above, payment will be deate. I also understand that WorkSource it is not responsible for items lost in the mail. If I fail to comply with any of the statements above, payment will be deate. I also understand that WorkSource it is not responsible for items lost in the mail. If I fail to comply with any of the statements above, payment will be deate. I also understand that WorkSource it is not responsible for items lost in the mail. If I fail to comply with any of the statements above, payment will be deate. I also understand that WorkSource it is not responsible for items lost in the mail. If I fail to comply with any of the statements above, payment will be deate. I also understand that WorkSource it is not responsible for items lost in the mail. If I fail to comply with any of the statements above, payment will be deate. I also understand that WorkSource it is not responsible for items lost in the mail. If I fail to comply with any of the statements above, payment will be deate. I also understand that WorkSource it is not re	Sunday	1/1/2023		New Year	r's Day	
For wide Staff Use Only-Do Not write Below this line   Funding	certify that I have by which legal action made to my schedule	een in training, cla ay be taken. I will r e. <b>Attendance She</b> e	ot receive suppo ets will not be p	ort for online classe rocessed if submit	es or remote attendance. I have ted seven or more days after th	notified my Career Facilitor of any changes that were ne due date. I also understand that WorkSource Three
Funding	PARTICIPANT S	SIGNATURE _				DATE
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Fotal Support Authorized     Total Support Authorized       Sign/Date     Sign/Date	Fransportation		days x 12.00	0 =	Transportation	_ days x 12.00 =
Sign/Date Sign/Date	Childcare		days x	_=	Childcare	days x =
	Total Support A	Authorized		_	Total Support Autho	rized
	Sign/Date				Sign/Date	
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## **Attendance Sheet**

Participant Na	me _			Phone #			
School/Training Site				Email Address			
Program of Stu							
		SIGN IN	SIGN OUT	COURSE NAME	INSTRUCTORS SIGNATURE		
DAY	DATE	TIME	TIME	(EXPSYC 2103)	(No initials)		
Monday	1/2/2023				,		
Tuesday	1/3/2023						
Wednesday	1/4/2023						
Thursday	1/5/2023						
Friday	1/6/2023						
Saturday	1/7/2023						
Sunday	1/8/2023						
**CO	MPLETE WITH	DARK INK	ONLY**	**NO WHITE OUT**	**NO PENCIL**		
		SIGN IN	SIGN OUT	COURSE NAME	INSTRUCTORS SIGNATURE		
DAY	DATE	TIME	TIME	(EXPSYC 2103)	(No initials)		
Monday	1/9/2023						
Tuesday	1/10/2023						
Wednesday	1/11/2023						
Thursday	1/12/2023						
Friday	1/13/2023						
Saturday	1/14/2023						
Sunday	1/15/2023						
which legal action m made to my schedul	een in training, cla ay be taken. I will I e. <b>Attendance She</b> ible for items lost i	not receive suppo ets will not be p n the mail. If I fa	ort for online classe rocessed if submit il to comply with a	es or remote attendance. I have r ted seven or more days after th ny of the statements above, payr	e information to obtain support is an act of fraud for notified my Career Facilitor of any changes that were due date. I also understand that WorkSource Thronent WILL BE DENIED.  DATE		
Funding		FOR	WIOA STAFF USE ONL	Y-DO NOT WRITE BELOW THIS LINE  Funding			
Transportation	·	days x 12.0	0 =	Transportation	days x 12.00 =		
Childcare		days x	_=	Childcare	days x =		
Total Support A	Authorized			Total Support Author	rized		
Sign/Date				Sign/Date			
Comments				Comments			



Participant Na	me			Phone #			
School/Trainin				Email Address			
Program of Stu							
		SIGN IN	SIGN OUT	COURSE NAME	INSTRUCTORS SIGNATURE		
DAY	DATE	TIME	TIME	(EXPSYC 2103)	(No initials)		
Monday	1/16/2023						
Tuesday	1/17/2023						
Wednesday	1/18/2023						
Thursday	1/19/2023						
Friday	1/20/2023						
Saturday	1/21/2023						
Sunday	1/22/2023						
**COI	MPLETE WITH	DARK INK	ONLY**	**NO WHITE OUT**	**NO PENCIL**		
		SIGN IN	SIGN OUT	COURSE NAME	INSTRUCTORS SIGNATURE		
DAY	DATE	TIME	TIME	(EXPSYC 2103)	(No initials)		
Monday	1/23/2023						
Tuesday	1/24/2023						
Wednesday	1/25/2023						
Thursday	1/26/2023						
Friday	1/27/2023						
Saturday	1/28/2023						
Sunday	1/29/2023						
which legal action m made to my schedule	een in training, cla ay be taken. I will I e. <mark>Attendance She</mark> ible for items lost i	not receive supp ets will not be p in the mail. If I fa	ort for online classe rocessed if submit il to comply with an	es or remote attendance. I have r ted seven or more days after th ny of the statements above, payr	e information to obtain support is an act of fraud for notified my Career Facilitor of any changes that were due date. I also understand that WorkSource Throment WILL BE DENIED.  DATE		
Funding		FOR	WIOA STAFF USE ONL	Funding			
Transportation	l	days x 12.0	0 =	Transportation	days x 12.00 =		
Childcare		days x	_=	Childcare	days x =		
Total Support A	Authorized			Total Support Author	rized		
Sign/Date							
Comments				Comments			
Comments				Comments			