CC-72-SES-Attend
Revised 5/18/2011
Exp. Date: 06/30/2020

Calhoun County
Attendance Roster

To be turned in with the invoice.

Provider's Name	School	Name of SES Instructor Providing Service

Page ___ of ___

Student's Name	Date	Time Session Begins	Time Session Ends	Authorized Adult Signature (Picks Up Student)

TUTOR'S SIGNATURE VERIFIES ALL DATA RECORDED ON THE ATTENDANCE ROSTER IS COMPLETE AND ACCURATE.

_____

SES Tutor's Signatue Date