



255 North Goodman Street
Rochester, NY 14607
ATT: Karen Hobson
khobson@rochesterworks.org

Attendance Sheet

(Use one sheet per class.)

Name: _____

Class: _____

Week #1

Date: _____

of Classes Attended: _____

of Hours Attended: _____

Week #2

Date: _____

of Classes Attended: _____

of Hours Attended: _____

Week #3

Date: _____

of Classes Attended: _____

of Hours Attended: _____

Week #4

Date: _____

of Classes Attended: _____

of Hours Attended: _____

Week #5

Date: _____

of Classes Attended: _____

of Hours Attended: _____

I certify that the student has attended class for the dates and times listed above.

Instructor's Signature: _____ Date: _____

Student's Signature: _____ Date: _____

**You need to document _____ weeks of attendance records
and return this form to Karen Hobson at RochesterWorks, Inc.**