ATTENDANCE VERIFICATION ROSTER FOR CEUs

Program Title_____ Location_____

Program Facilitator_____ Total Number of CEUs to Be Awarded _____

Daily attendance must be recorded. In order for a participant to receive CEUs for this program, 100% attendance is **REQUIRED**.

1. Insert Dates of Workshop.
2. List names of participants in alphabetical order.
3. Indicate participants' attendance by recording ***P*** for present and ***A*** for absent

DATES												
LIST NAMES BELOW												