CLASS PARTICIPATION RECORD

(TO BE COMPLETED BY EDUCATOR)

Registry Event ID Number										Educator Name:									
Course Title										Educator Phone Number:									
	DATE DAYS OF THE WEEK Time of								Time of	1									
		М	Т	W	Т	F	S	S	Session										
Session 1										Training Site:									
Session 2																			
Session 3										Training Site Address:									
Session 4																			
Session 5										City:									
Session 6																			
Session 7										Zip:									
Socion 9																			

CHECK ITEMS BELOW FOR COMPLETION (Setting: C=Center, F=Family Childcare Home, H=Head Start, O=Other)

PARTICIPANT'S NAME PLEASE PRINT			LAST 5 DIGITS OF SOCIAL SECURITY	REGISTRY ID		TENDA = Abse		EACH P :	SESS = Pres			Scores licable	Certificate Received		Paid on Site
	*as it will appear on certificate	SETTING	NUMBER	NUMBER	1	1 2		4	5	6	Pre	Post	YES	NO	
1															
2															
3															
4															
5															
6															
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10					·										

CLASS PARTICIPATION RECORD

(TO BE COMPLETED BY EDUCATOR)

	PARTICIPANT'S NAME PLEASE PRINT	SETTING	LAST 5 DIGITS OF SOCIAL SECURITY	REGISTRY ID	ATTENDANCE EACH SESSION A = Absent P = Present						Test Scores if applicable		Certificate Received		Paid on Site
	*as it will appear on certificate	SETI	NUMBER	NUMBER			:nt 3	4 4	5 6		Pre Post		YES NO		Site
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Center for Early Childhood Professional Development, College of Continuing Education, The University of Oklahoma, with funding from DHS Division of Child Care.

Questions? Call (405) 799-6383 locally or (888) 446-7608 toll-free statewide. Or stop by our office at 1801 N. Moore Avenue, Moore, OK 73160-3667.