

Sign-In Sheet

Course Title: _____

CE PIN # NS09 _____

Course Provider/Sponsor: _____

Course Instructor: _____

Course Date: _____

Location: _____

Attendees: Your <u>NC Certification #</u> is <i>required</i> to receive credit for attending this class. If you are not currently NC Certified, please mark "N/A" for certification #.				This Section to be Completed by Class Monitor		
Attendee Name (Typed / Printed)		Signature	NC Well Contractor Cert. #	Time In	Time Out	Total Hours Earned
Last Name	First Name	<i>Bob Driller</i>	NCWC 1234-A	7:55	5:02	8
1) _____	_____	_____	_____			
2) _____	_____	_____	_____			
3) _____	_____	_____	_____			
4) _____	_____	_____	_____			
5) _____	_____	_____	_____			
6) _____	_____	_____	_____			
7) _____	_____	_____	_____			
8) _____	_____	_____	_____			
9) _____	_____	_____	_____			
10) _____	_____	_____	_____			
11) _____	_____	_____	_____			
12) _____	_____	_____	_____			
13) _____	_____	_____	_____			
14) _____	_____	_____	_____			
15) _____	_____	_____	_____			
16) _____	_____	_____	_____			
17) _____	_____	_____	_____			
18) _____	_____	_____	_____			
19) _____	_____	_____	_____			
20) _____	_____	_____	_____			

Class Monitor: Time docked in 1/2 hour increments. Dock time for more than 10 min. late or leaving early.