

LVA/CC MONTHLY STUDENT ATTENDANCE FORM

Tutor name: _____, _____, 20____
Month Year

Enter # of class hours in box under day of the month

	Student Name	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	Total hrs				
1																																					
2																																					
3																																					
4																																					
5																																					
6																																					
7																																					
8																																					

Student signature	Date	Student signature	Date	Student signature	Date	Student signature	Date
Student signature	Date	Student signature	Date	Student signature	Date	Student signature	Date

Meeting place: _____

Goals met: _____

Send completed form at the end of the month to:

LVA/CC, Camden County Library, 203 Laurel Road, Voorhees, NJ 08043