UCNJ
Union College of Union County, NJ

ATTENDANCE SHEET

Semester and Year: _____	**Dates:** _____
Course Code: _____	**Time:** _____
Title: _____	**Day:** _____
Instructor: _____	**Room:** _____
Campus: _____	

Session	1	2	3	4	5	6	7	8	9	10	Final Grade
Date											
# CWID Student Name											
1											
2											
3											
4											
5											
6											
7											
8											
9											
10											
11											
12											
13											
14											
15											

A = Absent   / = Present
Please take attendance ACCURATELY at each session
Please return SIGNED report at the completion of each course
* Instructor Please Date Each Class Session!!!!

_____
Instructor Signature