Campus: _____

Attendance Activity Form

Name of Activity: **Date of Activity:**

Start Time: **End Time:**

Students Expected to Attend	Student ID	Students Actually Attended
		☐ Yes ☐ No
		☐ Yes ☐ No
		☐ Yes ☐ No
		☐ Yes ☐ No
		☐ Yes ☐ No
		☐ Yes ☐ No
		☐ Yes ☐ No
		☐ Yes ☐ No
		☐ Yes ☐ No
		☐ Yes ☐ No
		☐ Yes ☐ No
		☐ Yes ☐ No
		☐ Yes ☐ No
		☐ Yes ☐ No
		☐ Yes ☐ No
		☐ Yes ☐ No
		☐ Yes ☐ No
		☐ Yes ☐ No
		☐ Yes ☐ No
		☐ Yes ☐ No

_____ _____

Sponsor/Teacher Signature **Date** **Administrator Signature** **Date**

Copy of form must be submitted to Administration three days before scheduled date of school activity for approval. Attendance must be taken and reported on the day of the school related activity or field trip.