OKCPS FEDERAL PROGRAMS

TUTOR/STUDENT SIGN-IN SHEET

ONE PAGE PER TUTOR, TURNED IN DAILY

CIRCLE ONE: TITLE I / CSI

CIRCLE ONE: BEFORE / AFTER / SATURDAY / TEMPORARY TUTOR

SITE : _____ **SITE CODE:** _____

STAFF NAME: (PRINT):_____ **ID #** _____

DATE:	TIME: IN | OUT	SUBJECT/GRADE	TOTAL # OF HOURS
	|		

ID #	STUDENT NAME	TIME IN	TIME OUT

TEACHER'S SIGNATURE:_____ **DATE:** _____

PRINCIPAL'S SIGNATURE:_____ **DATE:** _____

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