

Class SIGN IN / Class COMPLETION Form – ALL COURSES

Trainer Instructions:

1. Distribute this form at the beginning of class. **Ask students to print legibly in PART 2** to ensure that they receive accurate and timely credit for their attendance.
2. Return completed form to Moose Training within 2 weeks after your class. Email to: mpowelson@mooseintl.org or fax to 630.966.2211.

PART 1 – Class Details (Trainer Area)

Class Name: Lodge Leadership & House Committee Governors Committees Trustees Treasurer & Audit Com.
 (Choose 1) 2HOTT Administrator School MLEC SEC TIPS

Training Date: ___/___/___ to ___/___/___ Training Time: _____ to _____

Training Location: Lodge/Chapter Name : _____ # _____
 Address: _____ City _____ State _____
 Moose Legion Name (if applicable) : _____ # _____

Trainer Name: _____ MID#: _____
 If applicable, list additional Trainers. Name: _____ MID#: _____
 Name: _____ MID#: _____

PART 2 – Student Details

Student Name	Current Position	MID#	Lodge/Chapter/Moose Legion Name &
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____
4. _____	_____	_____	_____
5. _____	_____	_____	_____
6. _____	_____	_____	_____
7. _____	_____	_____	_____
8. _____	_____	_____	_____
9. _____	_____	_____	_____

(continued on next page)

PART 2 – Student Details, cont.

Student Name	Current Position	MID#	Lodge/Chapter/Moose Legion Name &
10. _____	_____	_____	_____
11. _____	_____	_____	_____
12. _____	_____	_____	_____
13. _____	_____	_____	_____
14. _____	_____	_____	_____
15. _____	_____	_____	_____
16. _____	_____	_____	_____
17. _____	_____	_____	_____
18. _____	_____	_____	_____
19. _____	_____	_____	_____
20. _____	_____	_____	_____
21. _____	_____	_____	_____
22. _____	_____	_____	_____
23. _____	_____	_____	_____
24. _____	_____	_____	_____
25. _____	_____	_____	_____
26. _____	_____	_____	_____
27. _____	_____	_____	_____
28. _____	_____	_____	_____
29. _____	_____	_____	_____
30. _____	_____	_____	_____
31. _____	_____	_____	_____
32. _____	_____	_____	_____
33. _____	_____	_____	_____
34. _____	_____	_____	_____
35. _____	_____	_____	_____

Returned to Education & Training: ___ / ___ / ___

By (Name) _____