**LOCAL TRAINING INITIATIVE TIME SHEET**

**PROJECT NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**DATE:** \_\_\_\_\_\_ / \_\_\_\_\_\_\_ / \_\_\_\_\_\_\_ UN-SCHEDULED ABSENCE

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|   | **PRINT NAME** |  **SIGNATURE** | **TIME IN** | **TIME OUT** |  | **TIME OUT**  | **TIME IN**  |
| 1 |   |   |   |   |  |   |   |
| 2 |   |   |   |   |  |   |   |
| 3 |   |   |   |   |  |   |   |
| 4 |   |   |   |   |  |   |   |
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| 13 |   |   |   |   |  |   |   |
| 14 |   |   |   |   |  |   |   |
| 15 |   |   |   |   |  |   |   |
| 16 |   |   |   |   |  |   |   |
| N.B. Participants must sign off if leaving the project for personal reasons |
| SIGNATURE OF CO-ORDINATOR/ASSISTANT CO-ORDINATOR |
| SIGNATURE OF TUTOR: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | DATE: \_\_\_\_\_ /\_\_\_\_\_/ \_\_\_\_\_\_ |