

**WEST CENTRAL ARKANSAS WORKFORCE INVESTMENT AREA  
SCHOOL/ TRAINING ATTENDANCE RECORD**

School: \_\_\_\_\_

**NOTE: Instructor/Supervisor must initial each day participant attends school.**

Week of: \_\_\_\_\_ 1-Dec \_\_\_\_\_

CLASS	MON	TUES	WEDS	THURS	FRI	SAT

Week of: \_\_\_\_\_

CLASS	MON	TUES	WEDS	THURS	FRI	SAT

Week of: \_\_\_\_\_

CLASS	MON	TUES	WEDS	THURS	FRI	SAT

Week of: \_\_\_\_\_

CLASS	MON	TUES	WEDS	THURS	FRI	SAT

Week of: \_\_\_\_\_

CLASS	MON	TUES	WEDS	THURS	FRI	SAT

I attest that the above is a true and accurate record of my attendance.

\_\_\_\_\_  
Participant's Printed Name

\_\_\_\_\_  
Participant's Signature

\_\_\_\_\_  
Date turned in to Career Advisor

**OFFICE USE ONLY**

**Childcare**

Weekly Rate: \_\_\_\_\_  
 Monthly Rate: \_\_\_\_\_  
 # of Weeks \_\_\_\_\_  
 Weekly Rate \_\_\_\_\_ x # of weeks \_\_\_\_ =  
 Amount Due: \_\_\_\_\_

**Housing**

Rent/Mortgage Amount \_\_\_\_\_  
 Monthly Rate: \_\_\_\_\_  
 Amount Due: \_\_\_\_\_

**Transportation**

Transportation mileage for \_\_\_\_\_ is: \_\_\_\_\_  
 Mileage \_\_\_\_\_ x \$0.35

TOTAL AMOUNT CHILDCARE DUE FOR THE MONTH OF \_\_\_\_\_ IS: \$ \_\_\_\_\_

TOTAL AMOUNT HOUSING DUE FOR THE MONTH OF \_\_\_\_\_ IS: \$ \_\_\_\_\_

TOTAL AMOUNT TRANSPORTATION DUE FOR THE MONTH OF \_\_\_\_\_ IS: \$ \_\_\_\_\_

\_\_\_\_\_  
Career Advisor's Signature

\_\_\_\_\_  
Date: