Program Attendance Verification Form

Name/917 of Student:

Name of Event:

Time/Date of Event:

Name and Title of Presenter/Staff: ______________________________
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Signature of Presenter/Staff: ______________________________
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Name/917 of Individual(s) who went with you:

Name/917 of Individual(s): ______________________________
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Signature of Individual(s): ______________________________
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**It is your responsibility, as the student, to submit this form to the appropriate University Official by your deadline.**