

Sign-in Sheet – House Calls as Training

1. _____
 Instructor _____ Workshop (include CIT Course Number) _____

 Location _____ Date(s) _____

 Time: Start _____ End _____

Participants	PeopleSoft Employee ID # (NOT email ID)	MSC

2. _____
 Instructor _____ Workshop (include CIT Course Number) _____

 Location _____ Date(s) _____

 Time: Start _____ End _____

Participants	PeopleSoft Employee ID # (NOT email ID)	MSC

3. _____
 Instructor _____ Workshop (include CIT Course Number) _____

 Location _____ Date(s) _____

 Time: Start _____ End _____

Participants	PeopleSoft Employee ID # (NOT email ID)	MSC

4. _____
 Instructor _____ Workshop (include CIT Course Number) _____

 Location _____ Date(s) _____

 Time: Start _____ End _____

Participants	PeopleSoft Employee ID # (NOT email ID)	MSC