VIRGINIA INSURANCE CONTINUING EDUCATION COURSE
SIGN-IN/SIGN-OUT SHEET

Provider Name _____ Provider Number _____

Course Name _____ Course Number _____

Class Date _____ Class Start Time _____

Class Location _____

Only students meeting minimum attendance requirements may receive Certificates of Course Completion. **A student may not miss more than 15 percent. If the student misses more than 15 percent of the course, the student does not qualify for any Continuing Education credit. Partial credit cannot be awarded.**

Certificates of Course Completion must be distributed at the **end** of the course, during the last session of a multi-session course, or no later than 20 business days after the completion of the course.

By signing this roster the student certifies that they were engaged in the course for at least the amount of time equal to the credit hours.

TIME IN	STUDENT SIGNATURE	STUDENT ID #	STUDENT NAME (PLEASE PRINT)	STUDENT SIGNATURE	TIME OUT

Name of Instructor/Door Monitor signature verifying attendance procedures.

Subsequent pages may be initialed and do not require a full signature. _____

NOTE: Records of enrollments and course attendance must be kept on file for the current biennium plus the previous biennium.