

NB SAFETY COUNCIL - ATTENDANCE RECORD

TO BE COMPLETED BY STUDENT AND FORWARDED TO NB SAFETY COUNCIL IMMEDIATELY FOLLOWING COURSE

****PLEASE PRINT CLEARLY****

COURSE/CLIENT: _____

START DATE: _____

COURSE #: _____

	FIRST & LAST NAME	ADDRESS (CITY, PROV POSTAL CODE)	PHONE #	EMPLOYER	CERT./CARD #
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					

I hereby certify that the persons with graduation card numbers shown above have successfully completed this course: _____

(Instructor Signature)

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1 3					
1 4					
1 5					
1 6					
1 7					
1 8					
1 9					
2 0					
2 1					
2 2					
2 3					
2 4					

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