Education and Training Sign-In Sheet

Course Title: Documentation Trainer: Kim Wilson Date: 8/18-8/19 Location Macon St. College

PLEASE PRINT

1

Name Ashley Faulkner
County Jones Employee ID#
Email: affaulkner@dhr.state.ga.us

Supervisor Name Cynthia Waller
Phone # crwaller@dhr.state.ga.us
Email 478-986-3126

Day	1			2			3			4			5		
Time	In	In	Out	In	in	Out	In	In	Out	In	In	Out	In	In	Out
	8:15	1:00	3:00	8:20	12:20										

2

Name Candace Moore
County Jones Employee ID#
Email: chmoore...

Supervisor Name Cynthia Waller
Phone # 478-986-3126
Email crwaller...

Day	1			2			3			4			5		
Time	In	In	Out	In	in	Out	In	In	Out	In	In	Out	In	In	Out
	8:15	1:00	3:00	8:20	12:20										

3

Name Nancy McIlrath
County Wilkinson Employee ID#
Email: namcilrath@dhr.state.ga.us

Supervisor Name Donna Jarrard
Phone # 478-945-3258
Email

Day	1			2			3			4			5		
Time	In	In	Out	In	in	Out	In	In	Out	In	In	Out	In	In	Out
	8:30	1:00pm	3:00p	8:30	12:30	2:30									

4

Name Almisha Zanders
County Seminole Employee ID#
Email: alzanders@dhr.state.ga.us

Supervisor Name
Phone #
Email

Day	1			2			3			4			5		
Time	In	In	Out	In	in	Out	In	In	Out	In	In	Out	In	In	Out
	8:25	1:00	3:00	8:30	12:30	2:30									

5

Name Patrick Phillips
County Clayton Employee ID# 00954310
Email: paphillips@dhr.state.ga.us

Supervisor Name
Phone #
Email

Day	1			2			3			4			5		
Time	In	In	Out	In	in	Out	In	In	Out	In	In	Out	In	In	Out
	8:30	1:00	3:00	8:15	12:30	2:30									

Education and Training Sign-In Sheet

Course Title: Documentation Trainer: Lim Wilson Date: 8/18-8/19 Location Macon St College

PLEASE PRINT

6

Name
County Employee ID#
Email:

Supervisor Name
Phone #
Email

Day	1			2			3			4			5		
Time	In	In	Out	in	in	Out	In	In	Out	In	In	Out	In	In	Out

7

Name
County Employee ID#
Email:

Supervisor Name
Phone #
Email

Day	1			2			3			4			5		
Time	In	In	Out	In	in	Out	In	In	Out	In	In	Out	In	In	Out

Name
County Employee ID#
Email:

Supervisor Name
Phone #
Email

Day	1			2			3			4			5		
Time	In	In	Out	In	in	Out	In	In	Out	In	In	Out	In	In	Out

Name
County Employee ID#
Email:

Supervisor Name
Phone #
Email

Day	1			2			3			4			5		
Time	In	In	Out	In	in	Out	In	In	Out	In	In	Out	In	In	Out

Name
County Employee ID#
Email:

Supervisor Name
Phone #
Email

Day	1			2			3			4			5		
Time	In	In	Out	In	in	Out	In	In	Out	In	In	Out	In	In	Out