



VETERANS' SERVICES
 BUILDING 2, ROOM 200
 4000 LANCASTER DR NE
 PO BOX 14007
 SALEM OR 97309-7070
 (503) 399-5004, fax (503) 399-3908
 E-mail: veterans@chemeketa.edu

ATTENDANCE FORM

It is the student's responsibility to obtain verification of attendance, absences, and, instructor's signature for each course and turn this form in to the Chemeketa Veterans' Services Office at the end of each month. Online, Telecourses or other courses not in a regular classroom setting will require the student to request attendance verification from the instructor via e-mail. Instructors can then send an e-mail to the student with confirmation of satisfactory participation. **ODVA will not process payment to students until Chemeketa Veterans' Services submits attendance.**

NAME OF STUDENT: _____ **SS#** _____

ATTENDANCE FOR MONTH OF: _____

COURSE ID	ABSENCES Please indicate each date and the hours missed for each absence in a course	INSTRUCTOR'S SIGNATURE

STUDENT SIGNATURE: _____ **Date:** _____