

B004 Attendance Report# نموذج الحضور الشهري

Trainee Information			
Name		
ID		
Department		
Major	No. of
Week	Absents	Min/Hours Late	Remarks
Week #1
		
		
		
		
Week #2
		
		
		
		
Week #3
		
		
		
		
Week #4
		
		
		
		

Comments:

Training Supervisor Name
Department
Training Supervisor Signature
Date

B004 Attendance Report# نموذج الحضور الشهري

Trainee Information			
Name		
ID		
Department		
Major		
Week	Absents	No. of Min/Hours Late	Remarks
Week #1
		
		
		
		
Week #2		
		
		
		
		
Week #3		
		
		
		
		
Week #4		
		
		
		
		

Comments:

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Training Supervisor Signature
Date

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ID			
Department			
Major			
Week	Absents	No. of Min/Hours Late	Remarks
Week #1			
Week #2			
Week #3			
Week #4			

Comments:

Training Supervisor Name	
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