

STATE OF CALIFORNIA
 DEPARTMENT OF FORESTRY AND FIRE PROTECTION
EMPLOYEE MULTI-DAY TRAINING SIGN-UP SHEET

Instructor(s): Lawrence Erickson

Location: Felton Training Center

Dates: From: 3/21/09 To: _____ Page _____ of _____

Topic (s): EMS Recert #4

Instructors: Please fill in the dates of your class, and then have students print their names and initial under each class date that they attend. Please include grade at the end of class.

Attendees: Please print and sign your name legibly. Use an additional sheet if necessary.

1	Name and Station/Company (Please print)	1 st Day- Signature	Class Dates				Grade P/F
			Initial	Initial	#	✓	
					CEs	Paperwork	
2	Akin, Tony	Batt 4					
3	Barbour, Michael	Batt 3					
4	Bahlert, Dan						
5	Dewan, Jarrod						
6	Garcia, Manuel	Co 42					
7	Garcia, Trey	Batt 4					
8	Gil, Michael	Co 42					
9	Johnson, George	Co 29					
10	Long, Jeffrey	Batt 4					
11	Nazari, David	Co 42					
12	Thompson, Nick	Batt 4					
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NOTE TO INSTRUCTORS:

Upon class completion, please sign below the last student signature in order to close the class roster.