

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

Instructor(s): Engel, Rob \_\_\_\_\_

Wilson, Jed \_\_\_\_\_

Location: BLTC \_\_\_\_\_

Dates - From: 9/26/09 10/4/09 Page: 1 of 1

Topic (s): BFFA Haz Mat FRO, Confined Space, Decon

**Instructor:** Please fill in the dates of your class. Remember to include student's grade at the end of class.

**Students:** Print your name where indicated and sign or initial under each class date that you attend.

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

	Name and Station/Company (Please print)	Class Dates				Paperwork ✓	Grade P/F
		9/26	9/27	10/3	10/4		
		Signature (1 <sup>st</sup> Day)	Initial	Initial	Initial		
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**NOTE TO INSTRUCTORS:**

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