



Professional Development Continuing Education

CONFIRMATION OF ATTENDANCE

This is confirmation that

(Please print name)

(Department)

Course Attended:

Instructor's Signature

Date

Important note to CCCC Employee: You must have the instructor sign and date this form to confirm that you were in attendance; failure to do so could result in your department being charged for this class.

Please return signed form to Justina Conley, Human Resources, CHEC, Room 339 or fax to 972-548-6716.

Thank you!!