

Arkansas Northeastern College
Weekly Attendance Report
As required by Career Pathways

Students Name: _____	Week Of: Beginning Date : _____ Ending Date: _____							
	8:00 9:15	9:25 10:40	10:50 12:05	12:15 1:30	1:40 12:55	5:00	6:20 8:45	Other
Monday								
Instructor's Signature								
Attendance								
Satisfactory Progress								
Tuesday								
Instructor's Signature								
Attendance								
Satisfactory Progress								
Wednesday								
Instructor's Signature								
Attendance								
Satisfactory Progress								
Thursday								
Instructor's Signature								
Attendance								
Satisfactory Progress								
Friday								
Instructor's Signature								
Attendance								
Satisfactory Progress								

NOTE TO INSTRUCTORS: Please sign on the lines of the days and times the student attends your class. Please indicate whether this student is making satisfactory progress in your class. Also indicate the student's attendance by placing an "A" for absent or "P" for present. If additional comments are needed, please post on back of this form.

THANK YOU!

Student's Signature _____ Date: _____

Pathway's Staff _____ Date: _____