	Student Name:									
				Date:						
Monday:		Tuesday:		Wednesday:		Thursday:		Friday:		
In:	Out:	In:	Out:	In:	Out:	In:	Out:	In:	Out:	
									3	
Monday:		Tuesday:		Wedne <mark>sday:</mark>		Thursday:		Friday:		
In:	Out:	In:	Out:	In:	Out:	In:	Out:	In:	Out:	
					81					
Parent Signature:  Student Name:  Date:										
Monday:		Tuesday:		Wednesday:		Thursday:		Friday:		
In:	Out:	In:	Out:	In:	Out:	In:	Out:	In:	Out:	
Monday:		Tuesday:		Wednesda <mark>y:</mark>		Thursday:		Friday:		
In:	Out:	ln:	Out:	In:	Out:	ln:	Out:	ln:	Out:	

Parent Signature:\_\_\_\_\_