COLUMBUS CITY SCHOOLS

VCAP Sign-In/Sign-Out Daily Log
To be stored daily with the Attendance Secretary at the High School.

HIGH SCHOOL: _____   **VCAP LAB INSTRUCTOR:** _____   **TODAY'S DATE:** _____

ROOM NUMBER OF VCAP LAB _____

STUDENT NAME *(PLEASE PRINT)*	Student Number	Time In	Time Out	SIGNATURE	VCAP Lab Instructor: CHECK AFTER ENTERED IN IC
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VCAP LAB INSTRUCTOR SIGNATURE: _____   **DATE:** _____