

Mott Community College

Office of Financial Aid – Attendance Verification – TRA/MESC/NAFTA Students

Name: _____ MCC Student I.D.: _____

Two-Week Period Ending: _____

INSTRUCTORS: PLEASE VERIFY THIS STUDENT’S ATTENDANCE USING THE FOLLOWING CODES:

“P” = Present

“NT” = No Class (Non-Training Day)

“E” = Excused Absence

“A” = Absent Without Good Cause

Any other mark (initials, check mark, etc.) will interpreted that the student was present in your class.

Distance Learning course(s): Instructor needs to state if you are "successfully completing course requirements" -- or -- "not successfully completing course requirements". (See Below)

		M	T	W	R	F	S
1) Course: _____	Week 1						
Instr. Signature _____	Week 2						
2) Course: _____	Week 1						
Instr. Signature _____	Week 2						
3) Course: _____	Week 1						
Instr. Signature _____	Week 2						
4) Course: _____	Week 1						
Instr. Signature _____	Week 2						
5) Course: _____	Week 1						
Instr. Signature _____	Week 2						
6) Course: _____	Week 1						
Instr. Signature _____	Week 2						

1) **Distant Learning Course:** _____

Student is successfully completing course requirements date: _____.

Student is **NOT** successfully completing course requirements date: _____.

Independent / Non-Attendance Course - Instructor's Signature _____

2) **Distant Learning Course:** _____

Student is successfully completing course requirements date: _____.

Student is **NOT** successfully completing course requirements date: _____.

Independent / Non-Attendance Course - Instructor's Signature: _____

3) **Distant Learning Course:** _____

Student is successfully completing course requirements date: _____.

Student is **NOT** successfully completing course requirements date: _____.

Independent / Non-Attendance Course - Instructor's Signature: _____

I certify that this information is true and complete and that I am responsible for any errors or omissions. I understand that I must submit this completed document to the Office of Financial Aid along with a MESC *Request for Allowances by Workers in Training* form (TRA 923-A) every two weeks. I understand that I must attend all of my classes to receive any portion of my benefits through MESC.

Student Signature: _____ Date: _____

Verification Completed & Returned to Student: _____ Date _____ Staff Initials _____