‘MSI NOW’ Training - Group Sign-In Sheet

MSI NOW Training Course: _____
In the MSI/LMS Website: Online Courses & Resources

Date: _____/_____/_____ Time: _____ AM _____ PM

Agency: _____ Department: _____

Supervisor:_____ (Sign below) Supervisor Attended: Yes _____ No _____

Group Attendance: Your Training Administrator (Admin Access) may record as an External Learning Event in the LMS (Learning Management System)

	First Name *Please Print Clearly *	Last Name (Suffix)	Signature * To Receive Proper Credit Please Sign Clearly *
1			
2			
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I attest the above listed students attended the entire course and given the opportunity to ask questions of the material.

Supervisor / Training Administrator Signature:_____

Phone #: (_____) _____—_____ Email Address: _____

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