

**Student Information**

First Name:

Last Name:

NSHE ID:

College:

Department:

Major:

**Workshop Attendance**

Workshop Name	Date
1.	
2.	
3.	
4.	
5.	

**Student Signature**

\_\_\_\_\_  
Student signature

\_\_\_\_\_  
Date

<b>OUR USE ONLY</b>	
Workshop Attendance Approved: <input type="checkbox"/>	Workshop Attendance Denied: <input type="checkbox"/>
Comments:	