COURSE REGISTER

CDMS

Reset Form

Course:		**Staff Name:**	
Venue:		**Date Start:**	
Day/time:		**Date Finish:**	

Key for completing register: **X** = Present **O** = Not present **C** = Class cancelled **W** = Withdrawn (indicate reason, if known, overleaf)

Adult Learner Detail Form (Please tick)	Crèche No. of places needed?	Photo Consent Y/N	NAME	Learner Number														GLP /ILP	Review	
					1	2	3	4	5	6	7	8	9	10	11	12	13	DATE	please tick	

Course Register

Name	Learner Number	Reason Given for Withdrawing from Course