

Demo Site

Attendance for Monday, September 29, 2008

Homework Help

3:00 PM - 5:00 PM

Activity Name

Session Time

Lead Staff

Room / Building

Participant	Pr	Ab	Signature/Notes
Doe, John	<input type="checkbox"/>	<input checked="" type="checkbox"/>	_____
Dolores, Jean	<input checked="" type="checkbox"/>	<input type="checkbox"/>	_____
Jones, Janice	<input type="checkbox"/>	<input checked="" type="checkbox"/>	_____
Lee, James	<input checked="" type="checkbox"/>	<input type="checkbox"/>	_____
Michaelson, Michael	<input checked="" type="checkbox"/>	<input type="checkbox"/>	_____
Smith, Jim	<input checked="" type="checkbox"/>	<input type="checkbox"/>	_____
Sosa, Sammie	<input checked="" type="checkbox"/>	<input type="checkbox"/>	_____
Williams, Mary	<input checked="" type="checkbox"/>	<input type="checkbox"/>	_____