# Attendance Roster
# EBP Prevention Level 1 Programs
# Second Half of the Month

CDS Family & Behavioral Health Services, Inc.

**Cohort:** ☐ TGFD ☐ TGFV ☐ PS ☐ LS

**Teacher Last Name** *(If applicable)*

**Funding Source:** ☐ SAMH ☐ PPG

**Session** (Semester) | **Grade** | **Day (1-5)** | **Period**

**Primary Age Group:** ☐ 5-11 years ☐ 12-14 years ☐ 15-17 years

**County Targeted:** ☐ Alachua ☐ Levy

**Problem Targeted:** ☒ Increased Health Behavior

**POS:** ☐ WI: Williams ES CSA ☐ WE: Williston ES CSA ☐ WM: Williston MS CSA ☐ BE: Bronson ES CSA ☐ CE: Chiefland ES CSA ☐ HC: Westwood MS CSA ☐ HB: Howard Bishop MS CSA ☐ LM: Lincoln MS CSA ☐ CK: Cedar Key School CSA ☐ YS: Yankeetown School CSA

**Procedure:** ☒ STE02 (Drug Education School)

**Prev Spec:** _____ # _____ Name

**Month /Year:** _____ mm / _____ yy

**Time:** _____ : _____ - _____ : _____ from to

| Px Name: / Day of Month: | | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | 29 | 30 | 31 |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | | | | | | | | | | | | | | | | | |
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| 8 | | | | | | | | | | | | | | | | | |
| 9 | | | | | | | | | | | | | | | | | |
| 10 | | | | | | | | | | | | | | | | | |
| 11 | | | | | | | | | | | | | | | | | |
| 12 | | | | | | | | | | | | | | | | | |
| 13 | | | | | | | | | | | | | | | | | |
| 14 | | | | | | | | | | | | | | | | | |
| 15 | | | | | | | | | | | | | | | | | |
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| 28 | | | | | | | | | | | | | | | | | |
| 29 | | | | | | | | | | | | | | | | | |

H=HOLIDAY P=PRESENT A=ABSENT F=FIELD TRIP W=WITHDREW SH=SCHOOL HOLIDAY

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**Prev Spec:** _____ (#) _____ (Name) **Month /Year:** _____ (mm) / _____ (yy) **Time:** _____ : _____ (from) - _____ : _____ (to)

| | | |
|---|---|---|
| ***Day of Service:*** | | |
| *Narrative:* | | |
| ***Day of Service:*** | | |
| *Narrative:* | | |
| ***Day of Service:*** | | |
| *Narrative:* | | |
| ***Day of Service:*** | | |
| *Narrative:* | | |
| ***Day of Service:*** | | |
| *Narrative:* | | |
| ***Day of Service:*** | | |
| *Narrative:* | | |

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