

# Attendance Roster

## EBP Prevention Level 1 Programs

### First Half of the Month

CDS Family & Behavioral Health Services, Inc.

<b>Cohort:</b> <input type="checkbox"/> TGFD <input type="checkbox"/> TGFV <input type="checkbox"/> PS <input type="checkbox"/> LS	<hr/> <div style="text-align: center;">Teacher Last Name <i>(If applicable)</i></div>						
<b>Funding Source:</b> <input type="checkbox"/> SAMH <input type="checkbox"/> PPG	<table style="width: 100%;"><tr><th style="width: 15%;">Session (Semester)</th><th style="width: 15%;">Grade</th><th style="width: 15%;">Day (1-5)</th><th style="width: 15%;">Period</th><th style="width: 15%;"></th><th style="width: 15%;"></th></tr></table>	Session (Semester)	Grade	Day (1-5)	Period		
Session (Semester)	Grade	Day (1-5)	Period				

**Primary**  5-11 years  
**Age Group:**  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 CSA  
 YS: Yankeetown CSA

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

Prev Spec: \_\_\_\_\_ # \_\_\_\_\_ Name \_\_\_\_\_ Month/Year: \_\_\_\_/\_\_\_\_ Time: \_\_\_\_:\_\_\_\_ - \_\_\_\_:\_\_\_\_  
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Px Name:	Day of Month:		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
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H=HOLIDAY P=PRESENT A=ABSENT F=FIELD TRIP W=WITHDREW SH=SCHOOL HOLIDAY

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<b>Funding Source:</b>			
<input checked="" type="checkbox"/> SAMH			
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<b>Session (Semester)</b>	<b>Grade</b>	<b>Day (1-5)</b>	<b>Period</b>

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<b>Day of Service:</b>	
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<b>Day of Service:</b>	
Narrative:	

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