

MID-POINT PROGRESS AND ATTENDANCE REPORT

SECTION I		SECTION IV		
NAME OF EDUCATIONAL INSTITUTION CONTACT PERSON NAME OF STUDENT		1.	IS THE STUDENT'S ATTITUDE (CHECK ONE) COOPERATIVE INDIFFERENT	
		1	■ NOT COOPERATIVE ■ DISRUPTIVE	
NAME OF SCHOOL			_	
REPORTING PERIOD FROM TO		2.	IS THE STUDENT (CHECK ONE) MASTERING TRAINING COMPETENCIES (IF APPLICABLE, CHECK ONE BELOW)	
NAME OF COURSE			ON SCHEDULEAHEAD OF SCHEDULE	
SECTION II				
1. IN TRAINING # OF WEEK BE COMPL			NOT MASTERING TRAINING COMPETENCIES (IF APPLICABLE, CHECK ONE BELOW)	
2. INTERRUPTED	DATE		 POOR ATTENDANCE LACK OF EFFORT AND/OR INTEREST WORKING BELOW LEVEL FOR SATISFACTORY PROGRAM COMPLETION 	
3. TERMINATED PRIOR T COMPLETION	O DATE			
4. COMPLETED TRAINING	G DATE	3.	WHAT DIFFICULTIES, IF ANY, IS THE STUDENT HAVING WITH	
5.	DATE		TRAINING (CHECK ONE) NONE	
EMPLOYER			■ LEARNING SUBJECT MATTER	
			☐ FOLLOWING INSTRUCTIONS	
ADDRESS		1	SPEED AND ACCURACY	
			■ PERSONAL PROBLEMS	
CITY, STATE			OTHER (PLEASE BE SPECIFIC)	
JOB TITLE	SALARY/WAGE	4.	DOES THE STUDENT NEED ASSISTANCE FROM THE REFERRING AGENCY (CHECK ONE)	
SECTION III	I.			
COMMENTS/RECOMMENDATIONS				
NOTE: I HAVE READ AND UNDERSTOOD THIS MONTHLY PROGRESS REPORT.		_		
CLIENT/PARTICIPANT'S SIGNATURE		DAT		
REPORT OFFICIAL'S SIGNATURE		DAT	TE	