## Official SCECH Course Log

Name:				
Instructor:				
Start Date (mm/dd/yyy	ry):			
* This course is approve	ed for 24 SCECHs. Please i	make sure your time ent	ries are accurate.	
Date (mm/dd/yyyy)	Start Time (a.m. p.m.)	End Time (a.m. p.m.)	Time Subtotal	
		Time Total:		
Signature:		Date:		
Printed Name:				
***For NMC Use Only*	** Received date		(#) Quizzes Course Evaluation	
		Input MDE	Initials	