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| FOR OFFICIAL USE |
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# **Attendance sheet of a participant**

# **in an e-learning training programme**

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| Information on Vocational Training Centre (VTC) / Company / Organisation |
| Name: |
| Information on training programme |
| Title: |
| Number: | Approved Duration (hours): |
| Start date: | Completion date: |
| Trainee information |
| **I**dentity/**P**assport/**A**lien Registration Number (Note 1): | Number (Note 2): |
| Country of Issue (Note 3): |
| Name: | Surname: |
| Gender (M/F): | Job title (Note 4): |
| Attendance of participant in the training programme |
| Α/Α | Date | Daily attendance | Signatureof trainee |
| Hours (Note 5) | % (Note 6) |
| 1 |  |  |  |  |
| 2 |  |  |  |  |
| 3 |  |  |  |  |
| … |  |  |  |  |
| … |  |  |  |  |
| … |  |  |  |  |

The following signatories, trainee and trainer/trainers declare that we are fully aware of the implications of the Criminal Code regarding false representations and in general the Law on false representations.

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| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Name and surnameof trainee | Signatureof trainee | Date |

|  |  |  |
| --- | --- | --- |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Name and surnameof trainer | Signatureof trainer | Date |

**OFFICIAL STATEMENT**

Having been informed of the provisions of the Human Resource Development Laws, the State Aid Control legislation, the provisions of the relevant Policy and Procedures Guide and the E-Learning Supplement, which govern the cooperation of Vocational Training Centres and companies/organisations with the HRDA, as well as the consequences of the Criminal Code regarding false representations and in general the Law on false representations, I hereby declare responsibly that all information included or attached is accurate and true.

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| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Name and surname ofDirector orAuthorised Representative (VTC or company/organisation) | Signatureand official stamp oforganiser (VTC or company/organisation) | Date |

**NOTES**

**Note 1**: The Identity (**I**) or Passport (**P**) or Alien Registration Number (**A**) is filled. The letter **I** for citizens of the Republic of Cyprus, **I** or **P** for citizens of other EU member states and **P** or **A** for persons from third countries.

**Note 2**: The identity card number or the passport number or the alien registration number is filled. Please check the accuracy of the information from reliable sources.

**Note 3**: The country of issue of the identity card or passport is filled.

**Note 4**: The job title of the trainee is filled, which represents the work tasks that he/she performs.

**Note 5**: The total hours attended by the participant in the programme are filled.

**Note 6**: The attendance percentage is filled, which is calculated by dividing the total hours attended by the total duration of the programme.