

**ATTENDANCE OF TVET TRAINERS IN THE PREPARATION OF INTEGRATED AND COMPREHENSIVE ASSESSMENT ITEMS  
NATIONAL EXAMINATION, ACADEMIC YEAR 2020/2021**

School Name: ..... District: ..... Day: ..... Date: .....

S/N	Trainer names	National ID	Trade code	Telephone number	Signature, start	Signature, end
1						
2						
3						
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7						
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**Prepared by:**

**Approved by:**

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**The Deputy School Manager in Charge of Studies**

**The School Manager**