

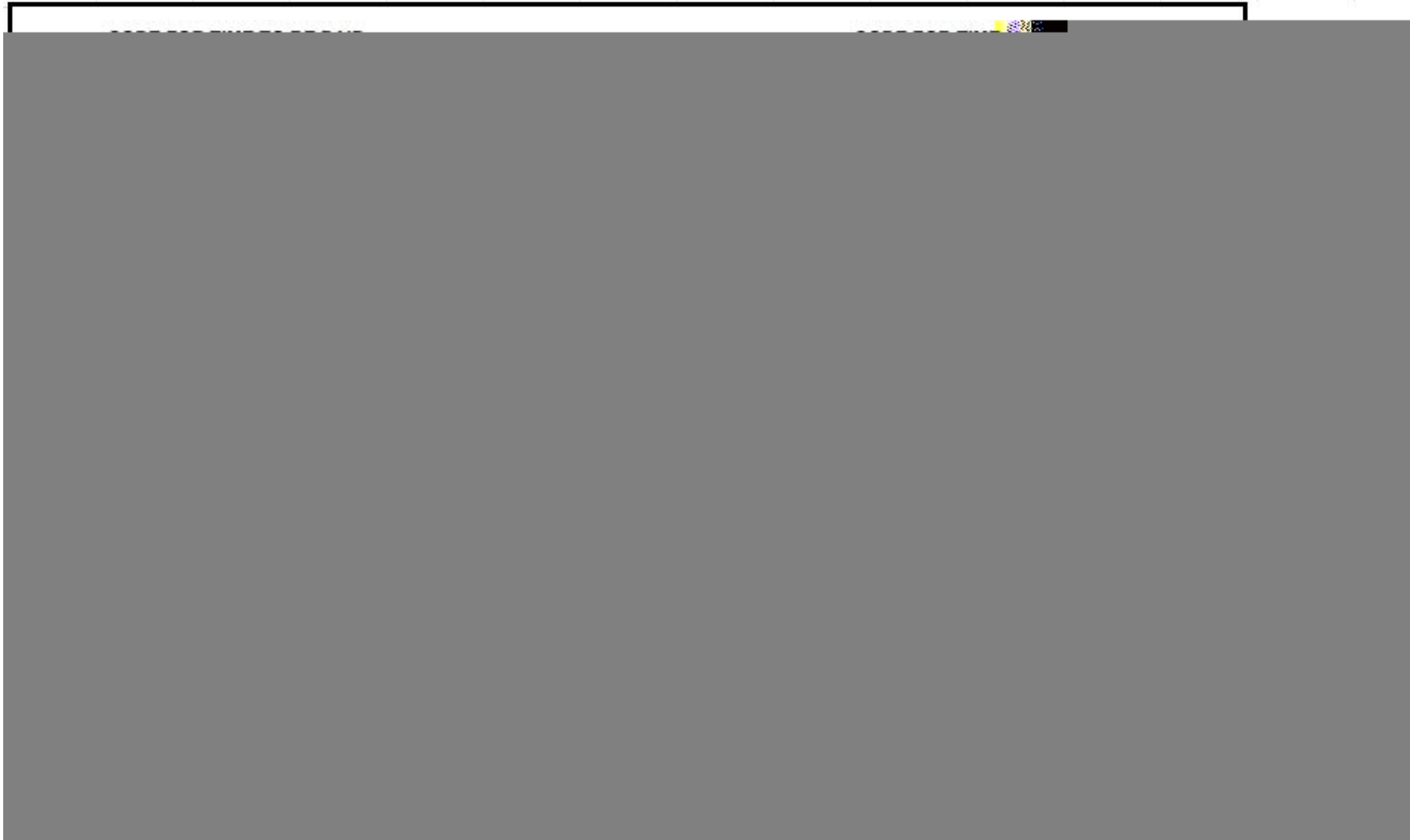
Period Beginning _____

Ending _____

Department _____

SOUTHEASTERN LOUISIANA UNIVERSITY

HAMMOND, LOUISIANA



ATTENDANCE CERTIFIED CORRECT

NAME _____

TITLE _____