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| --- | --- | --- | --- |
| Name of Student | | Address | Phone # |
| Student’s Tip # | Expiration Date | Provider Name | Certificate # |

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|  | **DATE** | | **START** | | | **END** | **HOURS\*** | | | **COMMENTS** | | | | | | | | **INSTRUCTOR NAME** | | **STUDENT INITIALS** | |
| **BTW** | | **RAN** |
| 1. |  | |  | | |  |  | |  |  | | | | | | | |  | |  | |
| 2. |  | |  | | |  |  | |  |  | | | | | | | |  | |  | |
| 3. |  | |  | | |  |  | |  |  | | | | | | | |  | |  | |
| 4. |  | |  | | |  |  | |  |  | | | | | | | |  | |  | |
| 5. |  | |  | | |  |  | |  |  | | | | | | | |  | |  | |
| 6. |  | |  | | |  |  | |  |  | | | | | | | |  | |  | |
| 7. |  | |  | | |  |  | |  |  | | | | | | | |  | |  | |
| 8. |  | |  | | |  |  | |  |  | | | | | | | |  | |  | |
| **OBSERVATION (OBS)** | | | |  | | | | | | | |  |  | | | | | | | | |
|  | **DATE** | | **START** | | | **END** | **INSTRUCTOR NAME** | | | | **STUDENT INITIALS** |  | **DATE** | **START** | | **END** | | | **INSTRUCTOR NAME** | | **STUDENT INITIALS** |
| 1. |  | |  | | |  |  | | | |  | 3. |  |  | |  | | |  | |  |
| 2. |  | |  | | |  |  | | | |  | 4. |  |  | |  | | |  | |  |
| **TOTAL HOURS** | | | | | **I agree I have received at least [INSERT HOURS hours of BTW instruction instructor.** | | | | | | | | | | | | | | | | | |
| **BTW** | | **OBS** | | | **DATE** | | | **INSTRUCTOR SIGNATURE** | | | | | | | **DATE** | | **STUDENT SIGNATURE** | | | | | |