PRE-CLOSING EDUCATION
ATTENDANCE SHEET

Class Date:_____

Counseling Agency/Counselor:_____

Class Location:_____

Total Number of Attendees: *(please count one per household)* _____

(only one signature required per household)

Group File Number:
_____

Applicant Name	Co-Applicant	CHFA Loan Number	HCO/MAX Number	Current Address	New Address	Home Telephone Number	Signature

his form may not be altered.

Rev. 11/2017