



Form ST-462 (01/2011)

## SELLER SERVER TRAINING COURSE SIGN IN SHEET

School Number: \_\_\_\_\_ - \_\_\_\_\_ Trainer Name: \_\_\_\_\_

Time: \_\_\_\_\_ AM  PM  Date: \_\_\_\_\_

Session location: \_\_\_\_\_  
(Address/City/Zip Code)

**To be completed by trainees only.**  
**Completed form must be presented to TABC staff upon request.**

	TRAINEE'S PRINTED NAME	SIGNATURE
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**SELLER SERVER TRAINING COURSE  
SIGN IN SHEET (page 2)**

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School Number:                      -                      Trainer Name:

	TRAINEE'S PRINTED NAME	SIGNATURE
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