

Oregon Judicial Department  
Certified Shorthand Reporters Program

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**PROOF OF ATTENDANCE**

Continuing Education Course

<b>Course Sponsor</b>		<b>Phone No.</b>
<b>Sponsor's Address</b>		
<b>Course Title</b>	<b>Date(s) &amp; Times</b>	<b>Hours of Education</b>
<b>Instructor's Name</b>	<b>Instructor's Signature</b>	

I certify and affirm that I attended this course, and I understand that the Office of the State Court Administrator may contact the sponsor to verify the course information I have provided.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name (please print)

\_\_\_\_\_  
Certificate Number