## APPENDIX E

## Couple Attendance Sheet (For Facilitator)

Four Gifts of Love® Class

Session Attendance (#)/Facilitator Contacts (C)\*

Names by Couple	1	С	2	С	3	С	4	С	5	С	6	С	7	C	8	1m	4m

Location/time	::	J
Date started:		
Date Ended:		

## Make-up Class Schedule:

Names	Session #	Date/Time	Done √

<sup>\*</sup>Check attended session, weekly encouragement contacts (C), and 1- and 4-month follow-ups for each person. Mark "A" if absent, then place name in the make-up class schedule below.