## **Employee Group Fitness Certification**

(For use by Roswell Recreation and Parks Instructors Only)

I (Instructor Print Name) hereby certify, to the best of my knowledge,		
(Employee's Name)	attended at least 8	30% of the classes held during this
particular session. The name of this class is		and the session period was
from (start date and finish date)	to	·
Instructor Signature:	Date:	
Employee Signature:	Date:	

Upon obtaining instructor's signature please return to Nick Franks in Human resources. You may scan and email to: <u>nfranks@roswellgov.com</u>. In person or interoffice mail is an appropriate way to turn in the form as well.