## SIGN OUT/SIGN IN SHEET

**INSTRUCTIONS:** Prior to leaving the residence, the resident (or responsible party, if applicable) must sign with the date and time of departure. Upon return to the residence, the resident (or responsible party) must sign with date and time of arrival. If responsible party signs, include the name of the resident(s) leaving/returning.

		SIGN OUT			SIGN IN		
ate	Time	Return Time	Signature	Date	Time	Signature	
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	<i>III</i>						
-Last			First Middle Attending	Physician		Record No. Room/Bed	
-LdSi			First Middle Attending	Filysician		necord No.   Noom/bed	