

TIER 3 LESSON LOG



T3LOG 0117

Please attach your student's enrollment form to this log.

Student Name: _____
LAST FIRST

New Address #1: _____

Student ID: _____

New Address #2: _____

Address: _____
INSTITUTION HOUSING

STREET ADDRESS

CITY STATE ZIP

Student's Birthdate: ____ / ____ / ____

Earliest Release Date: ____ / ____ / ____

(Remember your student's birthday by sending a card with Crossroads's return address.)

(Encourage your students to continue their lessons after they are released.)

BIBLICAL INTERPRETATION

Reported Score	Lesson #	Date Rec'd	# Wrong	Letter Included	Comments	Prayer Requests
<input type="checkbox"/>	1					
<input type="checkbox"/>	2					
<input type="checkbox"/>	3					
<input type="checkbox"/>	4					
<input type="checkbox"/>	5					
<input type="checkbox"/>	6					
<input type="checkbox"/>	7					
<input type="checkbox"/>	8					
<input type="checkbox"/>	9					
<input type="checkbox"/>	10					
<input type="checkbox"/>	11					
<input type="checkbox"/>	12					

BIBLICAL TRUTHS IN DEPTH

Reported Score	Lesson #	Date Rec'd	# Wrong	Letter Included	Comments	Prayer Requests
<input type="checkbox"/>	1					
<input type="checkbox"/>	2					
<input type="checkbox"/>	3					
<input type="checkbox"/>	4					
<input type="checkbox"/>	5					
<input type="checkbox"/>	6					
<input type="checkbox"/>	7					
<input type="checkbox"/>	8					
<input type="checkbox"/>	9					
<input type="checkbox"/>	10					

CHRISTIAN WORLDVIEW I

Reported Score	Lesson #	Date Rec'd	# Wrong	Letter Included	Comments	Prayer Requests
<input type="checkbox"/>	1					
<input type="checkbox"/>	2					
<input type="checkbox"/>	3					
<input type="checkbox"/>	4					
<input type="checkbox"/>	5					
<input type="checkbox"/>	6					
<input type="checkbox"/>	7					
<input type="checkbox"/>	8					
<input type="checkbox"/>	9					
<input type="checkbox"/>	10					
<input type="checkbox"/>	11					
<input type="checkbox"/>	12					
<input type="checkbox"/>	13					

CHRISTIAN WORLDVIEW II

Reported Score	Lesson #	Date Rec'd	# Wrong	Letter Included	Comments	Prayer Requests
<input type="checkbox"/>	1					
<input type="checkbox"/>	2					
<input type="checkbox"/>	3					
<input type="checkbox"/>	4					
<input type="checkbox"/>	5					
<input type="checkbox"/>	6					
<input type="checkbox"/>	7					
<input type="checkbox"/>	8					
<input type="checkbox"/>	9					
<input type="checkbox"/>	10					
<input type="checkbox"/>	11					
<input type="checkbox"/>	12					
<input type="checkbox"/>	13					