Department of Homeland Security U.S. Coast Guard CGI Form 4150 (Rev. 1/08)	**On Base/Cutter Course Attendee List**

1. UNIT	2. COLLEGE NAME	3. COURSE NAME
4. ESO NAME	**5. MIN # OF STUDENTS ENROLLED**	
6. CLASS START DATE	**7. CLASS END DATE**	

8. COMMENTS

STUDENT NAME LAST NAME, FIRST NAME, MIDDLE INT.	SSN	TA APPLICATION SENT Y/N	WAIVER REQUIRED Y/N	TA AUTH. RECEIVED Y/N	GRADE SUBMITTED TO CGI Y/N