Department of Homeland Security
U.S. Coast Guard
ETQC Form 4150 (Rev. 03/18)

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.	**EMPLID**	**TA APPLICATION SENT** Y/N	**WAIVER REQUIRED** Y/N	**TA AUTH. RECEIVED** Y/N	**GRADE SUBMITTED TO CGI** Y/N