**MONTHLY EMPLOYEE ATTENDANCE REPORT**

**(Print Clearly)**

**Employee Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Month/Year\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Dates** | **Initials by LT** | **PE** | **V** | **S** | **SF** | **F** | **PR** | **Dates** | **Initials by LT** | **PE** | **V** | **S** | **SF** | **F** | **PR** |
| **21** |  |  |  |  |  |  |  | **6** |  |  |  |  |  |  |  |
| **22** |  |  |  |  |  |  |  | **7** |  |  |  |  |  |  |  |
| **23** |  |  |  |  |  |  |  | **8** |  |  |  |  |  |  |  |
| **24** |  |  |  |  |  |  |  | **9** |  |  |  |  |  |  |  |
| **25** |  |  |  |  |  |  |  | **10** |  |  |  |  |  |  |  |
| **26** |  |  |  |  |  |  |  | **11** |  |  |  |  |  |  |  |
| **27** |  |  |  |  |  |  |  | **12** |  |  |  |  |  |  |  |
| **28** |  |  |  |  |  |  |  | **13** |  |  |  |  |  |  |  |
| **29** |  |  |  |  |  |  |  | **14** |  |  |  |  |  |  |  |
| **30** |  |  |  |  |  |  |  | **15** |  |  |  |  |  |  |  |
| **31** |  |  |  |  |  |  |  | **16** |  |  |  |  |  |  |  |
| **1** |  |  |  |  |  |  |  | **17** |  |  |  |  |  |  |  |
|  **2** |  |  |  |  |  |  |  | **18** |  |  |  |  |  |  |  |
|  **3** |  |  |  |  |  |  |  | **19** |  |  |  |  |  |  |  |
| **4** |  |  |  |  |  |  |  | **20** |  |  |  |  |  |  |  |
| **5** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **TOTAL** |  |  |  |  |  |  |  | **TOTAL** |  |  |  |  |  |  |  |

**\*\*\*\*Please have Lead Teacher (LT) Initial each day that you are present**

**Summary of Leave Taken: \_\_\_\_\_ Hours of Vacation (Annual Leave) \_\_\_\_\_ Hours of Sick Leave**

 **\_\_\_\_\_ Hours of Other (specify) \_\_\_\_\_ Hours of Sick Family**

**I certify the hours shown above are correct and the activities fairly reflect my work effort.**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Signature of Lead Teacher Date**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Employee Signature Date**

**PE = Personal Leave S = Sick Leave SF = Sick Family**

**V = Vacation F = Funeral PR = Professional Leave**

**\*\*\*\*\*Note: This must be turned into Cindy Squires at BOCES by the 20th of each month \*\*\*\*\***