

ABSENCE REPORT FORM

SCHOOL YEAR: _____ - _____

Name: (last) _____ (first) _____ (initial) _____

I was absent _____ working (day) / (hour) on _____
Month Day(s) Year

My substitute was _____

Reason for absence _____

Signed (by Principal/Supervisor) _____

Checked only by Principal / Supervisor

Deduct from salary _____ Sick leave _____ Vacation _____

Emergency leave _____ Personal day _____

Other _____

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