

Great Prairie Area Education Agency
 Monthly Attendance Report For Classified Staff
 2021-2022

Name _____
 (Please Print)

Month: _____

Position: _____

Daily Starting/Ending Time

DAY OF THE MONTH	HOURS WORKED	HOURS ABSENT	REASON FOR ABSENCE	<u>REASONS FOR ABSENCES</u>
1				Sick Leave: SL
2				Sick or Family Illness Leave: SFL
3				Family Sick Leave: FSL
4				Bereavement Leave: BL
5				Personal Leave: PL
6				Paid Vacation: V
7				<u>Other reasons:</u>
8				Union Leave
9				Jury/Legal Leave
10				Unpaid Leave
11				Military Leave
12				Political Leave
13				
14				It is necessary that all "non-exempt"
15				employees complete this form monthly to
16				comply with Wage and Hour law. Non-
17				exempt employees include all classified staff
18				and non-bargaining support staff.
19				
20				Record the number of hours worked and/or
21				absent for each day of the month;
22				corresponding weekend days are left blank
23				or crossed out.
24				
25				<u>Leave hours may be recorded in ½ hour</u>
26				<u>increments.</u>
27				
28				This form is <u>NOT</u> used for additional pay.
29				Hours worked over 40 per week must be
30				pre-approved by your direct supervisor and
31				recorded on a TIME SHEET.

DATE RECEIVED

SUPERVISOR