PERSONNEL 6033.2

SALARY EMPLOYEE ATTENDANCE REPORT

Board of Cooperative Educational Services
Madison –Oneida Counties
Verona, New York 13478

SALARY EMPLOYEE ATTENDANCE REPORT
Form #4044

Attendance Report Form for the Week of:_____

Name of Absentee	Date(s) of Absence and Reason				
	Monday	Tuesday	Wednesday	Thursday	Friday

Symbols for Reporting

V ..... Vacation Day

P ..... Personal Day

S ..... Personal Sick Day

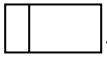
FH ..... Floating Holiday

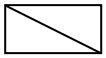
DF ..... Death in Family

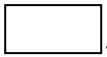
FI ..... Family Illness

SH ..... Schedule Holiday

O ..... Other*

 ..... ¼ Day

 ..... ½ Day

 ..... 1 Day

*When "O" is used as a reason, please describe on reverse side.

_____ Appropriate Administrator

_____ Date