

# Administrative Employee Attendance Record

**NAME:** \_\_\_\_\_

**SCHOOL:**

☐ Mount Ascutney ☐ Hartland ☐ Weathersfield ☐ S.U.

Week 1

Day	Date	Reason Code	# of Days Used
M			
T			
W			
Th			
F			

Week 2

Day	Date	Reason Code	# of Days Used
M			
T			
W			
Th			
F			

Week 3 (Used only during three week pay periods)

Day	Date	Reason Code	# of Days Used
M			
T			
W			
Th			
F			

_____	
Administrator Signature	Date
_____	
Superintendent/Designee	Date

Leave Time Codes	
010	Sick
015	Personal
020	Vacation
025	Bereavement
030	Professional
035	Holiday
040	Floater
050	Misc/No School
055	LWOP (leave w/o pay)