M.S.A.D. #41

SUBSTITUTE'S TIME and RECORD of EMPLOYEE'S ABSENCE

Week Ending _____ Signed _____

ABSENCE CODES

1 - Sick Leave (F1 Family Sick)
2 - Personal Leave
3 - Professional Leave
4 - Subpoena Leave
5 - Bereavement
6 - Other (Please explain)

DATE ABSENT	DAILY SUB ATTACHED √	SUBSTITUTE (If Used) Otherwise Leave Blank	ABSENT EMPLOYEE	ABSENCE CODE	SPECIAL ED √	LEAVE REQUEST ATTACHED √	EMPLOYEE # DAYS ABSENT	SUB # DAYS If Different

Note: <u>All</u> absent employees must be listed on this form even if no substitute is used.