

WENATCHEE SCHOOL DISTRICT #246 REPORT OF ABSENCE

MONTH _____ YEAR _____

EMPLOYEE'S NAME _____

POSITION _____

EMPLOYEE'S SIGNATURE _____

SUPERVISOR'S SIGNATURE _____

<p>SAMPLE</p> <table border="1" style="border-collapse: collapse; margin: auto;"> <tr> <td style="text-align: center;">01</td> </tr> <tr> <td style="text-align: center;">S</td> </tr> <tr> <td style="text-align: center;">8.00</td> </tr> </table>	01	S	8.00	<p>S Sick Leave E Emergency Leave B Bereavement Leave J Jury Duty C Subpoena (<i>indicate work or personal</i>) P Personal Leave V Vacation Leave S/B School Business (<i>describe business</i>)</p>
01				
S				
8.00				

01	02	03	04	05	06	07	08	09	10	11	12	13	14	15	16
/															
17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	
/															

DATE(S)	EXPLANATION	# OF HOURS

REPORT OF ABSENCE IS DUE THE LAST WORKING DAY OF THE MONTH