

Date	Notes	Paid	Unpaid	Additional Hours Worked
//				
//				

Name: _____
Last
First
Middle

Department: _____ Hire Date: ____/____/____

Position: _____ Phone #: (____) _____

Employee/Payroll #: _____

Vacation Time: _____ Sick Time: _____

Attendance Calendar

A - Additional Hours	J - Jury Duty	T - Tardy
B - Bereavement	K - Termination	U - Unexcused
C - Partial Hours Worked	L - Leave of Absence	V - Vacation
D - Doctor's Appointment	LE - Left Early	X - Illness in the Family
E - Excused	LO - Layoff	Y - Floating Holiday
F - FMLA	M - Military Leave	Z - Last Day Worked
G - Injury on Job	N - No Call/No Show	—
H - Holiday	P - Personal	—
I - Illness - Self	S - Suspension	—

 = Legal Public Holiday

Notes _____Notes _____Notes _____Notes: _____Notes _____Notes: _____May 2026June 2026July 2026

Notes _____

Notes _____Notes _____

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of be shared publicly or with third parties.

ATTORNEY

