

Employee #:

[illegible]

Attendance Calendar™

A - Additional Codes	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	

 = Local Public Holidays

Name: _____
Last First Middle

Department: _____ Hire Date: ____/____/____

Position: _____ Phone #: (____) _____

Employee/Payroll #: _____

Vacation Time: _____ Sick Time: _____

September 2024							
S	M	T	W	T	F	S	Total
1	2	3	4	5	6	7	
8	9	10	11	12	13	14	
15	16	17	18	19	20	21	
22	23	24	25	26	27	28	
29	30						

Notes

December 2024							
S	M	T	W	T	F	S	Total
1	2	3	4	5	6	7	
8	9	10	11	12	13	14	
15	16	17	18	19	20	21	
22	23	24	25	26	27	28	
29	30	31					

Notes

March 2025							
S	M	T	W	T	F	S	Total
						1	
2	3	4	5	6	7	8	
9	10	11	12	13	14	15	
16	17	18	19	20	21	22	
23	24	25	26	27	28	29	
30	31						

Notes

June 2025							
S	M	T	W	T	F	S	Total
1	2	3	4	5	6	7	
8	9	10	11	12	13	14	
15	16	17	18	19	20	21	
22	23	24	25	26	27	28	
29	30						

Notes

Comments

nel file at the end of each year.

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ATTORNEY

