

Month of																										
Days	Mon			Tue			Wed			Thu			Fri			Sat			Sun			TOTAL			Signature	Remarks
Name (Family, Given, MI)	T	C	CH	T	C	CH	T	C	CH	T	C	CH	T	C	CH	T	C	CH	T	C	CH	T	C	CH		

Legend:
T – no. of minutes/hours tardy
C – no. of minutes/hours absent from class
CH – no. of minutes/hours absent from counseling
OL – on leave (specify type of leave; maternity/paternity, sick, vacation, study, emergency, etc.)
OB – on official business (training/conferences, speaking engagements & other transactions with approval from the dep't/unit/college/university)

Certified by:

Noted by:

Dep't/Unit Head

Noted by:

Dean/Principal
Noted by:

VPA

Noted by:

VPAA