

Dundee Community Schools Absent Report

Name _____

Date of Occurance _____

Type

	Check One		Check One	School Business Description
A.M. 7:45 AM - 11:15 AM	<input type="checkbox"/>	School Business	<input type="checkbox"/>	
P.M. 11:16 AM - 3:00 PM	<input type="checkbox"/>	Sick/Family Illness	<input type="checkbox"/>	
Full Day	<input type="checkbox"/>	Personal Business	<input type="checkbox"/>	
				Is School Business Billable? To Who?
Dock Pay				
Bereavement				
Jury Duty				
Comp Time Banked/Used Reporting <hr/> Comp Hours Banked <hr/> Reason Banking Hours <hr/> Comp Hours Used <hr/>				MISD _____
				Special Ed _____
				Athletic Event _____
				Other _____
				Vacation _____

		Substitute Used
<u>Account Codes</u>		<u>Building (Select One)</u>
School Improvement	112210000000??20 3110	Elementary
Technology Conference	1128300051100000 3110	Middle School
At Risk Conference	111250003060???? 3110	High School
Title IIA	112211942020???? 3110	Riverside Academy

I certify that the above information is true and correct.

Employee Signature _____

Supervisor's Signature _____

Business Manager Initials(comp only) _____

Superintendent Initials (comp only) _____

Please have building principal approve and forward to Business Office.