## **ABSENT EMPLOYEE AND SUBSTITUTE TEACHER REPORT**

This form must be completed for each pay period (1st-15th or 16th-30th/31st) by the absent employee's supervisor. Substitute employees for non-teaching personnel should complete a Payroll Sheet for payment. Submit the completed form to the District Office on the 1st and 16th of each month for recording absences and for paying substitute teachers.

Absent Er	nployee	(Print le	egal name	):			Employ	/ee	No.	:				_ Fiscal Year: 2023-2024	
Month/ Day Absent	Time employee was absent		Total Hrs - Absent	Reason for Absence Code	Substitute Teachers	Emp. No.	K - 6 Portion of the	7 - 12  Periods (Do not include prep period)					de	Account Codes  If the absent employee was on Staff Development Leave, record the appropriate Account Code and Travel	
	From	То	(exclusive of lunch)	(See Below)	(Print Legal Name)	110.	Day (1/4, 1/2, 3/4 or 1)	1	2	3	4 5	6	7	Authorization Number (TA#).  Account Code TA#	
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Illness: FamilyFAM Illness: PersonalPI HolidayHOL Inclement WeatherINC Jury DutyJUR Leave Without Pay.LWOP  Professional Leave.PRF Snow DaySNO Staff Dev. LeaveSD Student Field TripSFT VacationVAC Workers CompWCI			Substitute Teacher's Sig	Substitute Teacher's Signature											
* AFSCME Members only					Employee Signature	Principal'	Principal's/Supervisor's/Staff Development Committee Chairnerson's Signature Dat								