

**COMPANY NAME**

**ABSENTEE REPORT**

EMPLOYEE NAME \_\_\_\_\_

DEPARTMENT/DIVISION \_\_\_\_\_

SUPERVISOR \_\_\_\_\_

DATE(S) OF ABSENCE \_\_\_\_\_

REASON FOR ABSENCE \_\_\_\_\_

<input type="checkbox"/> ILLNESS	<input type="checkbox"/> BEREAVEMENT LEAVE
<input type="checkbox"/> JURY DUTY	<input type="checkbox"/> LEAVE OF ABSENCE, PERSONAL
<input type="checkbox"/> PERSONAL REASONS	<input type="checkbox"/> LEAVE OF ABSENCE, MEDICAL
<input type="checkbox"/> VACATION	<input type="checkbox"/> LEAVE OF ABSENCE, FAMILY CARE

SUPERVISOR APPROVAL \_\_\_\_\_

**FOR PAYROLL USE ONLY**

CHARGED TO:

<input type="checkbox"/> SICK PAY	<input type="checkbox"/> PAY DEDUCTION
<input type="checkbox"/> VACATION	<input type="checkbox"/> LEAVE OF ABSENCE

SICK LEAVE: PREVIOUS HOURS REMAINING \_\_\_\_\_  
CURRENT HOURS CHARGED \_\_\_\_\_  
HOURS REMAINING \_\_\_\_\_

VACATION: PREVIOUS HOURS REMAINING \_\_\_\_\_  
CURRENT HOURS CHARGED \_\_\_\_\_  
HOURS REMAINING \_\_\_\_\_

ORIGINAL: PERSONNEL FILE  
COPY TO: EMPLOYEE  
SUPERVISOR

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