

HEAD START ATTENDANCE

CENTER

CLASS
of kids enrolled: _____

MONDAY'S DATE

- | |
|-----------------------------|
| REASONS FOR ABSENCES |
| [1] Health Reasons |
| [2] Lack of Transportation |
| [3] Family Emergency |
| [4] Inclement Weather |
| [5] Working/School |
| [6] Unknown |
| [7] Out of Town |
| [8] Staff Rescheduled |
| [9] Pre-School |
| [10] Not Coming/Other Appts |
| [11] With Absent parent |

NAME Last/First	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
	<input type="checkbox"/> Presnt <input type="checkbox"/> Absent (Excused) <input type="checkbox"/> Unexcused	<input type="checkbox"/> Presnt <input type="checkbox"/> Absent (Excused) <input type="checkbox"/> Unexcused	<input type="checkbox"/> Presnt <input type="checkbox"/> Absent (Excused) <input type="checkbox"/> Unexcused	<input type="checkbox"/> Presnt <input type="checkbox"/> Absent (Excused) <input type="checkbox"/> Unexcused	<input type="checkbox"/> Presnt <input type="checkbox"/> Absent (Excused) <input type="checkbox"/> Unexcused
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Center: _____

Teacher: _____

Monday's Date: _____

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