EMPLOYEE ATTENDANCE LOG FOR COVID-19 EMERGENCY CHILD CARE

Week of: _____

Please only track attendance for staff who are physically working on-site. Part time is 20 hours or less.

Employee Name	Full/Part Time?	Teacher or Staff?	HOURS WORKED						
			MON.	TUES.	WED.	THURS.	FRI.	SAT.	SUN.
	o Full o Part Time	o Teacher o Staff							
	o Full o Part Time	o Teacher o Staff							
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