

STAFF ATTENDANCE

WEEK ENDING: _____

NAME OF CHILD CARE PROGRAM _____

STAFF NAME & JOB TITLE	SCHEDULED HOURS & ROOM/GROUP ASSIGNMENT	MONDAY		TUESDAY		WEDNESDAY		THURSDAY		FRIDAY	
		ARRIVE	DEPART	ARRIVE	DEPART	ARRIVE	DEPART	ARRIVE	DEPART	ARRIVE	DEPART
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STAFF ATTENDANCE RECORDS MUST ACCURATELY REFLECT THE NUMBER & IDENTITY OF STAFF PRESENT AT ALL TIMES DURING OPERATING HOURS – INCLUDE ARRIVAL AND DEPARTURE TIMES TO REFLECT BREAKS, ERRANDS, AND APPOINTMENTS OUTSIDE OF THE PROGRAM.