

PACIFIC GROVE UNIFIED SCHOOL DISTRICT  
MONTHLY TIME REPORT ON ATTENDANCE FOR CLASSIFIED EMPLOYEES

SCHOOL OR WORK CENTER:	MONTH:
------------------------	--------

NAME	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31

- Absence Reasons:**
- |                         |                    |                        |
|-------------------------|--------------------|------------------------|
| S – Sick Leave          | FL – Flex Time     | L – Leave without Pay  |
| PN – Personal Necessity | U – Used Comp Time | J – Jury duty          |
| B – Bereavement         | V – Vacation       | A – Industrial Illness |

Note: The classified contract requires that most leaves or time off require prior approval. Approval documentation must be attached or on file at the payroll office.

\_\_\_\_\_  
Principal or Supervisors Signature