## **ACADEMIC ATTENDANCE FORM**

|               | Academic Year: |   |               |      |      |     |    |   |   |              |                     |    |    |              |    |    |    |    |    |    |    |    |    |  |      |       |     |       |                 |    |    |        |
|---------------|----------------|---|---------------|------|------|-----|----|---|---|--------------|---------------------|----|----|--------------|----|----|----|----|----|----|----|----|----|--|------|-------|-----|-------|-----------------|----|----|--------|
| Student Name: |                |   |               |      |      |     |    |   |   |              |                     |    |    | Grade Level: |    |    |    |    |    |    |    |    |    |  |      |       |     |       |                 |    |    |        |
| Month         | 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 | Totals |
| August        |                |   |               |      |      |     |    |   |   |              |                     |    |    |              |    |    |    |    |    |    |    |    |    |  |      |       |     |       |                 |    |    |        |
| September     |                |   |               |      |      |     |    |   |   |              |                     |    |    |              |    |    |    |    |    |    |    |    |    |  |      |       |     |       |                 |    |    |        |
| October       |                |   |               |      |      |     |    |   |   |              |                     |    |    |              |    |    |    |    |    |    |    |    |    |  |      |       |     |       |                 |    |    |        |
| November      |                |   |               |      |      |     |    |   |   |              |                     |    |    |              |    |    |    |    |    |    |    |    |    |  |      |       |     |       |                 |    |    |        |
| December      |                |   |               |      |      |     |    |   |   |              |                     |    |    |              |    |    |    |    |    |    |    |    |    |  |      |       |     |       |                 |    |    |        |
| January       |                |   |               |      |      |     |    |   |   |              |                     |    |    |              |    |    |    |    |    |    |    |    |    |  |      |       |     |       |                 |    |    |        |
| February      |                |   |               |      |      |     |    |   |   |              |                     |    |    |              |    |    |    |    |    |    |    |    |    |  |      |       |     |       |                 |    |    |        |
| March         |                |   |               |      |      |     |    |   |   |              |                     |    |    |              |    |    |    |    |    |    |    |    |    |  |      |       |     |       |                 |    |    |        |
| April         |                |   |               |      |      |     |    |   |   |              |                     |    |    |              |    |    |    |    |    |    |    |    |    |  |      |       |     |       |                 |    |    |        |
| May           |                |   |               |      |      |     |    |   |   |              |                     |    |    |              |    |    |    |    |    |    |    |    |    |  |      |       |     |       |                 |    |    |        |
| June          |                |   |               |      |      |     |    |   |   |              |                     |    |    |              |    |    |    |    |    |    |    |    |    |  |      |       |     |       |                 |    |    |        |
| July          |                |   |               |      |      |     |    |   |   |              |                     |    |    |              |    |    |    |    |    |    |    |    |    |  |      |       |     |       |                 |    |    |        |
| H-Holiday     |                |   | S-Sick Absent |      |      |     |    |   |   |              | $\sqrt{-}$ Full-day |    |    |              |    |    |    |    |    |    |    |    |    | Total Days Attended: State Requirement (may vary): 180 *Difference (if any): |      |       |     |       |                 |    |    |        |
| X-No Schoo    | ol             |   | V-V           | 'aca | tion | Bre | ak |   |   | / - Half-day |                     |    |    |              |    |    |    |    |    |    |    |    |    |  | וווט | ei ei | ICE | (II a | ııy <i>)</i> .∣ |    |    |        |
| Comments:     |                |   |               |      |      |     |    |   |   |              |                     |    |    |              |    |    |    |    |    |    |    |    |    |  |      |       |     |       |                 |    |    |        |
|               |                |   |               |      |      |     |    |   |   |              |                     |    |    |              |    |    |    |    |    |    |    |    |    |  |      |       |     |       |                 |    |    |        |
|               |                |   |               |      |      |     |    |   |   |              |                     |    |    |              |    |    |    |    |    |    |    |    |    |  |      |       |     |       |                 |    |    |        |
|               |                |   |               |      |      |     |    |   |   |              |                     |    |    |              |    |    |    |    |    |    |    |    |    |  |      |       |     |       |                 |    |    |        |
|               |                |   |               |      |      |     |    |   |   |              |                     |    |    |              |    |    |    |    |    |    |    |    |    |  |      |       |     |       |                 |    |    |        |
|               |                |   |               |      |      |     |    |   |   |              |                     |    |    |              |    |    |    |    |    |    |    |    |    |  |      |       |     |       |                 |    |    |        |

<sup>\*</sup> Dates to float if needed or carry-over if permitted.