

STAFF ABSENCE RECORD			
MANAGER'S PLEASE NOTE: STAFF CONTRACTS SPECIFY NO MORE THAN 5 DAYS PAID SICK IN ANY ONE ROLLING YEAR. THIS REFRESHES 12 MONTHS AFTER THE DAY 5'S ABSENCE.			
EMPLOYEE NAME:			
JOB TITLE:			
DATES OF ABSENCE	NUMBER OF DAYS OFF	REASON FOR ABSENCE	CONTACTED/WHO/WHEN/HOW

ABSENCE CODES:

S=SICKNESS, A/A=AUTHORISED ABSENCE, U/A=UNAUTHORISED ABSENCE. IF OTHER PLEASE SPECIFY.