

Daily Staff Attendance Sheet

Date: _____

Department: _____

Supervisor: _____

No.	Name	Staff ID	Position	Time In	Time Out	Present	Absent	Remarks
1	_____	_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____
2	_____	_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____
3	_____	_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____
4	_____	_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____
5	_____	_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____

Supervisor Signature

Date