MONTCLAIR STATE UNIVERSITY

ADMINISTRATIVE PERSONNEL ATTENDANCE RECORD
UNCLASSIFIED PROFESSIONAL STAFF

Department or Office: _____

Biweekly Payroll from :_____ through _____

Codes: **V**–Vacation **S** - Sick **H** - Holiday **LAWOP** – Leave of Absence without Pay

NAME (Listed Alphabetically)	Sick Leave (Dates)	Vacation (Dates)	Other Time Used (Dates)

Please report attendance for administrators in each administrative staff element. Reports should be received in the Personnel/Payroll Office by noon on Monday following the close of each payroll period. Negative reports are necessary.

To the best of my knowledge and belief, under penalties of perjury, I declare that the above reflects absences in this department for the period indicated, that the employees named hereon rendered services in accordance with applicable regulations, and they provided no less than the minimum work time required for the position.

Date: _____ Signature-Department Head _____