

Student Name: _____ [] M [] F DOB: _____ ID # _____
(LAST) (FIRST)

Parent/Guardian: _____ Phone: _____

Address: _____ Zip Code: _____

SEIT Providers Name: _____

																									NUMBER OF DAYS			
																									ATT	ABS	LATE	
2020	M	T	W	TH	F	M	T	W	TH	F	M	T	W	TH	F	M	T	W	TH	F	M	T	W	TH	F			
September		1	2	3	4	7	8	9	10	11	14	15	16	17	18 H	21	22	23	24	25	28 H	29	30					
October				1	2	5	6	7	8	9	12 H	13	14	15	16	19	20	21	22	23	26	27	28	29	30			
November	2	3	4	5	6	9	10	11 H	12	13	16	17	18	19	20	23	24	25	26 H	27 H	30							
December		1	2	3	4	7	8	9	10	11	14	15	16	17	18	21	22	23	24	25 H	28	29	30	31				
January 2021					1 H	4	5	6	7	8	11	12	13	14	15	18 H	19	20	21	22	25	26	27	28	29			
																									1st Term Totals			
																									ATT	ABS	LATE	
	M	T	W	TH	F	M	T	W	TH	F	M	T	W	TH	F	M	T	W	TH	F	M	T	W	TH	F			
February	1	2	3	4	5	8	9	10	11	12	15 H	16	17	18	19	22	23	24	25	26								
March	1	2	3	4	5	8	9	10	11	12	15	16	17	18	19	22	23	24	25	26	29	30	31					
April				1	2	5	6	7	8	9	12	13	14	15	16	19	20	21	22	23	26	27	28	29	30			
May	3	4	5	6	7	10	11	12	13	14	17	18	19	20	21	24	25	26	27	28	31 H							
June		1	2	3	4	7	8	9	10	11	14	15	16	17	18	21	22	23	24	25	28	29	30					
																									2nd Term Totals			
																									School Year Totals			

09/08/2020: First Day of Service
 9/18/2020: Rosh Hashanah
 9/28/2020: Yom Kippur
 10/12/2020: Columbus Day

11/11/2020: Veteran's Day (observed)
 11/26/2020 – 11/27/2020: Thanksgiving
 12/25/2020: Christmas Day
 01/01/2021: New Year's Day

01/18/2021: Dr. Martin Luther King Jr. Day
 02/15/2021: President's Day
 05/31/2021: Memorial Day
 06/30/2021: Last Day of Service

Date Admitted: ___/___/___ Date Discharged: ___/___/___ Reason: _____

ADDITIONAL ATTENDANCE INFORMATION – Please document all Student Absences, Provider Absences and Make Ups

Date	

SIGNATURE _____ **DATE** _____