



## MONTHLY ATTENDANCE SHEET

TIME MANAGEMENT  
STAFF INFORMATION

(Last Name)	(First Name)	(Other Names)
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PERN:	Part Time Factor: %	E-mail:
Job Title:	Duty Station:	
Start Date:	End Date:	Unit/Project:

### ATTENDANCE

Month:		WORK HOURS in HH:MM (24 HR format)		MEAL HOURS in HH:MM (24 HR format)		No. of completed work hours	Remarks
##	Date	Start Time	End Time	Start Time	End Time		
1							
2							
3							
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30							
31							

Staff Signature	
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### RECEIVED & REVIEWED BY

Supervisor Signature	
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Name:
Title:
Email:
Date Signed:

HR Focal Point Signature	
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Name:
Title:
Email:
Date Signed: