## Your Attendance for the Month of April

9 9 9 9					9 9 9 9	
SUN	MON	TUE	WED	THU	FRI	SAT
	01	02	03	04	05	06
	AB	PR	PR	PR	PR	AB
	<u>Update</u>					<u>Update</u>
07	80	09	10	11	12	13
WO	PR	HD	AB	HD	PR	AB
			<u>Update</u>			<u>Update</u>
14	15	16	17	18	19	20
WO	PR	PR	PR	PR	HD	AB
						<u>Update</u>
21	22	23	24	25	26	27
WO	PR	PR	PR	PR	AB	AB
					<u>Update</u>	<u>Update</u>
28	29	30				
WO	AB	AB				
	<u>Update</u>	<u>Update</u>				

٠	Weekly Off (WO)	Absent (AB)	Present (PR)	Paid Leave (PL)	Maternity Leave (ML)	Special Leave (SL)	Leave of Absence (LOA)
	4	9	14	0	0	0	0
٠	Leave Without Pay (LWP)	Work Regularizatio n (WR)	Public Holiday (HD)				

<sup>\*</sup>Denotes Submitted & awaiting approval.

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