

## Absence / Missed Shift Tracking Sheet

**Location:** \_\_\_\_\_

**Pay Period:** \_\_\_\_\_

First Name	Last Name	Date Absent	Reason (If others, write down reason)				Use Vacation Pay	
			Check Appropriate Box				Check Appropriate Box	
			<input type="checkbox"/> Sick	<input type="checkbox"/> Medical	<input type="checkbox"/> Personal	<input type="checkbox"/> Other:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
			<input type="checkbox"/> Sick	<input type="checkbox"/> Medical	<input type="checkbox"/> Personal	<input type="checkbox"/> Other:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
			<input type="checkbox"/> Sick	<input type="checkbox"/> Medical	<input type="checkbox"/> Personal	<input type="checkbox"/> Other:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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			<input type="checkbox"/> Sick	<input type="checkbox"/> Medical	<input type="checkbox"/> Personal	<input type="checkbox"/> Other:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
			<input type="checkbox"/> Sick					

Approved by Location Manager: \_\_\_\_\_ Date Approved: \_\_\_\_\_  
 Received by Payroll/HR: \_\_\_\_\_ Date Received: \_\_\_\_\_

**Notes:**

- 1 Please e-mail this form to payroll@hsdc.ca and cc: hr@cocobrooks.com on Friday before 4pm prior to cutoff date.  
2 If there are additional missed shift on Saturdays, please e-mail it on Saturday or Monday, 8am at the latest.
- 3 The dates that an employee was absent are unpaid and **vacation pay will not be issued unless requested.**
- 4 Employee may be requested to provide a doctor's note for future absences.
- 5 This form will be reviewed periodically.
- Employees who were absent will not be eligible to make up the missed hours.