# FAIRBANKS NATIVE ASSOCIATION
## ABSENCE REPORT

### Employee Section

<table>
<thead>
<tr>
<th>Name of employee</th>
<th>Department</th>
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<tr>
<th>Start</th>
<th>End</th>
<th>Absent</th>
<th>Code</th>
<th>Check one</th>
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(Please do not have form cross pay periods)

**Employee Signature:** ________________________________  **Date:** __________________

**Reason for Absence (w/code):**
- □ Vacation (1)
- □ Injury on job (6)
- □ Bereavement (9)*
- □ Sick (illness in family, 2)
- □ Leave without pay (LWOP, 7)
- □ Military duty(10)*
- □ Sick (personal illness, 3)
- □ Jury duty (8)*
- □ Medical Appointment (check one: doctor □ 4, or dentist □ 5)
- □ Other (11)

**Supervisor Section**

**Called in by:**  □ Employee  □ Other ______

(should be in emergency cases only)

**Date/Time called in:** ______

**Pick one**
- □ Scheduled
- □ Unscheduled
- □ Late (show # of minutes late) ______

**Pick one**
- □ Approved
- □ Unapproved (not paid)

**Person receiving phone call:** ______  **Date:** ______

**Supervisors Signature** ________________________________  **Date** __________________

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Payroll Records – Original
Program Records – Please make a copy before submitting to payroll.