# SOUTHWEST COOK COUNTY COOPERATIVE ASSOCIATION FOR SPECIAL EDUCATION

## STUDENT ATTENDANCE

Attendance for (month)_____

Teacher:_____ Program:_____ Building:_____ District:_____

| Student Name-Alpha Order | F=FULL DAY ½ AM ½ PM | M | T | W | T | F | M | T | W | T | F | M | T | W | T | F | M | T | W | T | F | M | T | W | T | F | District of Residence | Total Days Enrolled | Total Days Present | Total Days Absent |
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Indicates A.M. Absence \
Indicated P.M. Absence /
Indicated all Day Absence >

**L/H** - Legal Holiday (not counted as days enrolled or present)
**O** - Institute Day (not counted as days enrolled or present)
**X** - Emergency Closing (not counted as days enrolled or present)
Half-Day Inservice counts as full day of attendance or absence

**E** - First Day Enrolled
**D** - Indicates Day Dropped
**T** - Indicates Tardiness
**S** - Indicates Suspension

USE SCHOOL CALENDAR FOR CORRECT NUMBER OF ATTENDANCE DAYS - DUE LAST SCHOOL DAY OF EACH MONTH - MAIL, FAX OR BRING TO ADMINISTRATIVE OFFICE Rev 3/07/08