

# MIDDLE SCHOOL/HIGH SCHOOL COUNT DAY ABSENCE FORM

School Year \_\_\_\_\_  
 Count Day \_\_\_\_\_

School District \_\_\_\_\_  
 School Building \_\_\_\_\_

## INSTRUCTIONS:

List each pupil absent on the count day. Note the grade of the pupil, check each period that the pupil was absent on the count day, and indicate whether the absence was excused or unexcused. During the count period, indicate the date that the pupil returned to each class period that the pupil was absent from on the count day.

| Name<br>(Last, First) |  | Gr | Class Period Absent |                 |                 |                 |                 |                 | Excused or<br>Unexcused | Date Returned to Class Period |                 |                 |                 |                 |                 | FTE |
|-----------------------|--|----|---------------------|-----------------|-----------------|-----------------|-----------------|-----------------|-------------------------|-------------------------------|-----------------|-----------------|-----------------|-----------------|-----------------|-----|
|                       |  |    | 1 <sup>st</sup>     | 2 <sup>nd</sup> | 3 <sup>rd</sup> | 4 <sup>th</sup> | 5 <sup>th</sup> | 6 <sup>th</sup> |                         | 1 <sup>st</sup>               | 2 <sup>nd</sup> | 3 <sup>rd</sup> | 4 <sup>th</sup> | 5 <sup>th</sup> | 6 <sup>th</sup> |     |
| 1.                    |  |    |                     |                 |                 |                 |                 |                 |                         |                               |                 |                 |                 |                 |                 |     |
| 2.                    |  |    |                     |                 |                 |                 |                 |                 |                         |                               |                 |                 |                 |                 |                 |     |
| 3.                    |  |    |                     |                 |                 |                 |                 |                 |                         |                               |                 |                 |                 |                 |                 |     |
| 4.                    |  |    |                     |                 |                 |                 |                 |                 |                         |                               |                 |                 |                 |                 |                 |     |
| 5.                    |  |    |                     |                 |                 |                 |                 |                 |                         |                               |                 |                 |                 |                 |                 |     |
| 6.                    |  |    |                     |                 |                 |                 |                 |                 |                         |                               |                 |                 |                 |                 |                 |     |
| 7.                    |  |    |                     |                 |                 |                 |                 |                 |                         |                               |                 |                 |                 |                 |                 |     |
| 8.                    |  |    |                     |                 |                 |                 |                 |                 |                         |                               |                 |                 |                 |                 |                 |     |
| 9.                    |  |    |                     |                 |                 |                 |                 |                 |                         |                               |                 |                 |                 |                 |                 |     |
| 10.                   |  |    |                     |                 |                 |                 |                 |                 |                         |                               |                 |                 |                 |                 |                 |     |
| 11.                   |  |    |                     |                 |                 |                 |                 |                 |                         |                               |                 |                 |                 |                 |                 |     |
| 12.                   |  |    |                     |                 |                 |                 |                 |                 |                         |                               |                 |                 |                 |                 |                 |     |
| 13.                   |  |    |                     |                 |                 |                 |                 |                 |                         |                               |                 |                 |                 |                 |                 |     |
| 14.                   |  |    |                     |                 |                 |                 |                 |                 |                         |                               |                 |                 |                 |                 |                 |     |
| 15.                   |  |    |                     |                 |                 |                 |                 |                 |                         |                               |                 |                 |                 |                 |                 |     |
| 16.                   |  |    |                     |                 |                 |                 |                 |                 |                         |                               |                 |                 |                 |                 |                 |     |
| 17.                   |  |    |                     |                 |                 |                 |                 |                 |                         |                               |                 |                 |                 |                 |                 |     |
| 18.                   |  |    |                     |                 |                 |                 |                 |                 |                         |                               |                 |                 |                 |                 |                 |     |
| 19.                   |  |    |                     |                 |                 |                 |                 |                 |                         |                               |                 |                 |                 |                 |                 |     |
| 20.                   |  |    |                     |                 |                 |                 |                 |                 |                         |                               |                 |                 |                 |                 |                 |     |

I certify that this is a true and accurate list of all eligible FTE reported for pupils who were absent on the count day.

\_\_\_\_\_  
 Authorized Representative Signature

\_\_\_\_\_  
 Date