

**PROGRESS INC.  
ADMIN. STAFF ONLY**

**PLEASE PRINT CLEARLY!!**

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First Name

Last Name

DUE DATE:

February 1, 2024

PAY PERIOD:

January 16-31

Position: \_\_\_\_\_

PAY DATE:

February 16, 2024

	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	DO NOT WRITE IN SECTION BELOW
	T	W	TH	F	S	SU	M	T	W	TH	F	S	SU	M	T	W	
<b>Program/Admin Managers</b>																	
<b>Hourly Administration</b>																	
Payroll Only: →																	
<b>Quality Assurance</b>																	
Payroll Only: →																	
Payroll only: →																	
Payroll only: →																	
Payroll only: →																	
Payroll only: →																	
Payroll only: →																	
<b>TIME OFF:</b>																	
<b>P (PTO) H (HOL) C (CSR)</b>																	

**ALL staff must record sign in and sign out times for each shift!!**

Comments:

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Employee Signature

Supervisor Signature