

**PROGRESS INC.**

**Senior Services, Nursing, Day Services, Residential and Windlands Shift Staff Only**

**PLEASE PRINT CLEARLY!!**

First Name

Last Name

DUE DATE:

PAY PERIOD:

Please Check:  Day Serv  DIDD Residential  Senior Serv  Sr Serv Residential  Nursing  Windlands  ECF

Position:

PAY DATE:

Client Name(s)	In	Out	16	17	18	19	20								21	22	23	24	25	26	27					28	29	30	31	Leave this column blank!	
			W	TH	F	S	SU	M	T	W	TH	F	S	SU	M	T	W	TH													
Payroll office only →																															
Payroll office only →																															
Payroll office only →																															
Payroll office only →																															
Payroll office only →																															
Payroll office only →																															
TIME OFF:																															
P (PTO) H (HOL) C (CSR)																															

Staff must record sign in and sign out times for each shift!!including a.m./p.m.!! Remember 12a.m. is MIDNIGHT and 12p.m. is Noon.

Comments:

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Employee Signature

\_\_\_\_\_  
Supervisor Signature

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