

**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 Senior Residential  Nursing  Windlands  ECF

Grey Areas: Accounting Use Only

PAY DATE:

Client Name(s)		16	17	18	19								27	28	29	30	Leave this column blank!	
		TH	F	S	SU	M	T	W	TH	F	S	SU	M	T	W	TH		
	In																	
	Out																	
Payroll office only →																		
	In																	
	Out																	
Payroll office only →																		
	In																	
	Out																	
Payroll office only →																		
	In																	
	Out																	
Payroll office only →																		
	In																	
	Out																	
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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