

Employee Absence/Casual Employment

Facilities & Maintenance staff

NAME: _____

S.I.N. _____

ADDRESS: _____

D.O.B. _____

Location/School: _____

For the Two-Week Period of:

Maintenance Casual Labour Rate is \$15.00 / hour

WEEK 1

Date	Day	Hours	Rate of Pay	Name of permanent employee casual person is replacing; if not replacing a permanent employee provide a description of work performed.	Reason for permanent employee absence	Code -to be completed by Facilities
	SUN					
	MON					
	TUES					
	WED					
	THUR					
	FRI					
	SAT					

WEEK 2

	SUN					
	MON					
	TUES					
	WED					
	THUR					
	FRI					
	SAT					

Employee Signature

In School Administrator approval

Facilities Supervisor approval