

Classroom \_\_\_\_\_ Week of \_\_\_\_\_

Child's Name	Monday		Tuesday		Wednesday		Thursday		Friday		Comments
	In	Out	In	Out	In	Out	In	Out	In	Out	
1.											
2.											
3.											
4.											
5.											
6.											
7.											
8.											
9.											
10.											
11.											
12.											
13.											
14.											
15.											
16.											
17.											
18.											
19.											
20.											

Total Count: \_\_\_\_\_

