

DAILY ATTENDANCE REGISTER

ECD NAME: Bethel Crèche & Pre-School

MONTH: October

YEAR: 2032

QUARTER: 4

WARD:

			DAYS OF THE MONTH																															DAYS	DAYS	SUBSIDISED (X OR ✓)	
no	NAME AND SURNAME	AGE	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	(P)	(A)	YES	NO
1	Botha Liam	9	W	W							W	W						W	W						W	W						W	W			✓	
2	Chabata Aliyah	10	W	W							W	W						W	W						W	W						W	W			✓	
3	Chiloane Zanoxolo	10	W	W							W	W						W	W						W	W						W	W			✓	
4	Credo Mashaba	10	W	W							W	W						W	W						W	W						W	W				
5	Devese Kairo	10	W	W							W	W						W	W						W	W						W	W				✓
6	Dibakwane Bokang	10	W	W							W	W						W	W						W	W						W	W			✓	
7	Dlamini Sithelakuhla	10	W	W							W	W						W	W						W	W						W	W			✓	
8	Dube Anele	10	W	W							W	W						W	W						W	W						W	W			✓	
9	Dube Junior	8	W	W							W	W						W	W						W	W						W	W			✓	
10	Dube Zanokuhle		W	W							W	W						W	W						W	W						W	W				✓
11	Fakude Lethothuhle	8	W	W							W	W						W	W						W	W						W	W				✓
12	Fakude Simthandile	10	W	W							W	W						W	W						W	W						W	W			✓	
13	Fankomo Lazoya	9	W	W							W	W						W	W						W	W						W	W			✓	
14	Hobyane Mikhenso	8	W	W							W	W						W	W						W	W						W	W				✓
15	Kgoedi Melokuhle	11	W	W							W	W						W	W						W	W						W	W			✓	
TOTAL NUMBER OF CHILDREN PRESENT																																					
TOTAL NUMBER OF CHILDREN ABSENT																																					

ADJUSTMENTS TO CHANGE IN NUMBER OF CHILDREN		
DESCRIPTION	TOTAL	COMMENTS
1. ADDITIONALS		
2. DROP -OUTS		
3. TRANSFERRED		
4. DECEASED		

N.B* THE TOTALS MUST CROSS BALANCE

MARK WITH: (P, A OR W)

PRESENT
ABSENT
WEEKEND

I DECLARE THAT THE INFORMATION IS CORRECT AND A TRUE REFLECTION

CHAIRPERSON

DATE

PRINCIPAL

DATE

TREASURER

DATE

DEPARTMENTAL REPRESENTATIVE: _____

DATE: _____

DAILY ATTENDANCE REGISTER

ECD NAME: Bethel Crèche & Pre-School

MONTH: October

YEAR: 2032

QUARTER: 4

WARD:

			DAYS OF THE MONTH																															DAYS	DAYS	SUBSIDISED (X OR ✓)	
no	NAME AND SURNAME	AGE	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	(P)	(A)	YES	NO
16	Khoza Justice	7	W	W							W	W						W	W						W	W						W	W			✓	
17	Khoza Sbhongokuhle	10	W	W							W	W						W	W						W	W						W	W			✓	
18	Khumalo Fion	10	W	W							W	W						W	W						W	W						W	W			✓	
19	Khumalo Pelliah	10	W	W							W	W						W	W						W	W						W	W			✓	
20	Kiara Sanderson	11	W	W							W	W						W	W						W	W						W	W				✓
21	Lamula Kgodoso	9	W	W							W	W						W	W						W	W						W	W				✓
22	Lawrence Abby	10	W	W							W	W						W	W						W	W						W	W				✓
23	Lawrence Taydén	10	W	W							W	W						W	W						W	W						W	W			✓	
24	Lekhuleni Monde	11	W	W							W	W						W	W						W	W						W	W				✓
25	Lekhuleni Sanele	11	W	W							W	W						W	W						W	W						W	W			✓	
26	Letshane Bothlale	10	W	W							W	W						W	W						W	W						W	W			✓	
27	Leyane Sphiwosethu	9	W	W							W	W						W	W						W	W						W	W				✓
28	Liyam Sanderson	10	W	W							W	W						W	W						W	W						W	W			✓	
29	Lubisi Favour	10	W	W							W	W						W	W						W	W						W	W			✓	
30	Mabila Ubenami	8	W	W							W	W						W	W						W	W						W	W			✓	
TOTAL NUMBER OF CHILDREN PRESENT																																					
TOTAL NUMBER OF CHILDREN ABSENT																																					

ADJUSTMENTS TO CHANGE IN NUMBER OF CHILDREN		
DESCRIPTION	TOTAL	COMMENTS
1. ADDITIONALS		
2. DROP -OUTS		
3. TRANSFERRED		
4. DECEASED		

N.B* THE TOTALS MUST CROSS BALANCE

MARK WITH: (P, A OR W)

PRESENT
ABSENT
WEEKEND

I DECLARE THAT THE INFORMATION IS CORRECT AND A TRUE REFLECTION

CHAIRPERSON

DATE

PRINCIPAL

DATE

TREASURER

DATE

DEPARTMENTAL REPRESENTATIVE: _____

DATE: _____

DAILY ATTENDANCE REGISTER

ECD NAME: Bethel Crèche & Pre-School

MONTH: October

YEAR: 2032

QUARTER: 4

WARD:

			DAYS OF THE MONTH																															DAYS	DAYS	SUBSIDISED (X OR ✓)	
NO	NAME AND SURNAME	AGE	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	(P)	(A)	YES	NO
31	Mabuza Kwandokuhle	11	W	W							W	W						W	W						W	W						W	W			✓	
32	Mahatlani Wakwetsima	11	W	W							W	W						W	W						W	W						W	W			✓	
33	Maila Lisa	8	W	W							W	W						W	W						W	W						W	W			✓	
34	Makola Boikano	10	W	W							W	W						W	W						W	W						W	W			✓	
35	Makwela Charisma	10	W	W							W	W						W	W						W	W						W	W			✓	
36	Malete Nkazimulo	11	W	W							W	W						W	W						W	W						W	W				✓
37	Malope Lerumo	10	W	W							W	W						W	W						W	W						W	W			✓	
38	Maluleke Enelo	10	W	W							W	W						W	W						W	W						W	W				✓
39	Maluleke Gendo	7	W	W							W	W						W	W						W	W						W	W				✓
40	Malumane Hlelokuhle	11	W	W							W	W						W	W						W	W						W	W				✓
41	Manhique Keitumetsi	10	W	W							W	W						W	W						W	W						W	W				✓
42	Manzini Andzani	11	W	W							W	W						W	W						W	W						W	W				✓
43	Maphanga Dumisile	11	W	W							W	W						W	W						W	W						W	W				✓
44	Marula Bokamosa	10	W	W							W	W						W	W						W	W						W	W			✓	
45	Maseko Onalerona	10	W	W							W	W						W	W						W	W						W	W			✓	
TOTAL NUMBER OF CHILDREN PRESENT																																					
TOTAL NUMBER OF CHILDREN ABSENT																																					

ADJUSTMENTS TO CHANGE IN NUMBER OF CHILDREN		
DESCRIPTION	TOTAL	COMMENTS
1. ADDITIONALS		
2. DROP -OUTS		
3. TRANSFERRED		
4. DECEASED		

N.B* THE TOTALS MUST CROSS BALANCE

MARK WITH: (P, A OR W)

PRESENT
ABSENT
WEEKEND

I DECLARE THAT THE INFORMATION IS CORRECT AND A TRUE REFLECTION

CHAIRPERSON
DATE

PRINCIPAL
DATE

TREASURER
DATE

DEPARTMENTAL REPRESENTATIVE: _____

DATE: _____

DAILY ATTENDANCE REGISTER

MONTH: October

YEAR: 2032

QUARTER: 4

WARD:

[illegible]

ADJUSTMENTS TO CHANGE IN NUMBER OF CHILDREN		
DESCRIPTION	TOTAL	COMMENTS
1. ADDITIONALS		
2. DROP -OUTS		
3. TRANSFERRED		
4. DECEASED		

N.B* THE TOTALS MUST CROSS BALANCE

MARK WITH: (P, A OR W)

I DECLARE THAT THE INFORMATION IS CORRECT AND A TRUE REFLECTION

CHAIRPERSON

PRINCIPAL

TREASURER

DATE _____

DATE _____

DATE _____

DEPARTMENTAL REPRESENTATIVE:

DATE: _____

PRESENT

ABSENT

WEEKEND

DAILY ATTENDANCE REGISTER

ECD NAME: Bethel Crèche & Pre-School

MONTH: October

YEAR: 2032

QUARTER: 4

WARD:

			DAYS OF THE MONTH																															DAYS	DAYS	SUBSIDISED (X OR ✓)	
NO	NAME AND SURNAME	AGE	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	(P)	(A)	YES	NO
61	Mchulu Rhulane	10	W	W							W	W						W	W						W	W						W	W			✓	
62	Mdluli Ayama	10	W	W							W	W						W	W						W	W						W	W			✓	
63	Mdluli Kayton		W	W							W	W						W	W						W	W						W	W				✓
64	Mdluli Mpho		W	W							W	W						W	W						W	W						W	W				✓
65	Mdluli Olwethu	9	W	W							W	W						W	W						W	W						W	W			✓	
66	Methula Ayama	9	W	W							W	W						W	W						W	W						W	W			✓	
67	Mgiba Nsika	9	W	W							W	W						W	W						W	W						W	W			✓	
68	Mgibe Tshego	11	W	W							W	W						W	W						W	W						W	W				✓
69	Mgwenya Bayandile	9	W	W							W	W						W	W						W	W						W	W			✓	
70	Mgwenya Mellod	11	W	W							W	W						W	W						W	W						W	W			✓	
71	Mgwenya Nonhle	12	W	W							W	W						W	W						W	W						W	W				✓
72	Mgwenya Smamukele	11	W	W							W	W						W	W						W	W						W	W				✓
73	Mhaule Langelihle	11	W	W							W	W						W	W						W	W						W	W				✓
74	Mhlaba Brianna	9	W	W							W	W						W	W						W	W						W	W			✓	
75	Mhlanga Marquisa	8	W	W							W	W						W	W						W	W						W	W				✓
TOTAL NUMBER OF CHILDREN PRESENT																																					
TOTAL NUMBER OF CHILDREN ABSENT																																					

ADJUSTMENTS TO CHANGE IN NUMBER OF CHILDREN		
DESCRIPTION	TOTAL	COMMENTS
1. ADDITIONALS		
2. DROP -OUTS		
3. TRANSFERRED		
4. DECEASED		

N.B* THE TOTALS MUST CROSS BALANCE

MARK WITH: (P, A OR W)

PRESENT
ABSENT
WEEKEND

I DECLARE THAT THE INFORMATION IS CORRECT AND A TRUE REFLECTION

CHAIRPERSON

DATE

PRINCIPAL

DATE

TREASURER

DATE

DEPARTMENTAL REPRESENTATIVE: _____

DATE: _____

DAILY ATTENDANCE REGISTER

ECD NAME: Bethel Crèche & Pre-School

MONTH: October

YEAR: 2032

QUARTER: 4

WARD:

			DAYS OF THE MONTH																															DAYS	DAYS	SUBSIDISED (X OR ✓)	
NO	NAME AND SURNAME	AGE	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	(P)	(A)	YES	NO
76	Milazi Wandile	9	W	W							W	W						W	W						W	W						W	W				✓
77	Mkhabela Sphokuhle	10	W	W							W	W						W	W						W	W						W	W			✓	
78	Mkhabela Tirani	10	W	W							W	W						W	W						W	W						W	W			✓	
79	Mkhabela Tiyani	10	W	W							W	W						W	W						W	W						W	W				✓
80	Mkhantswa Langelihle	8	W	W							W	W						W	W						W	W						W	W			✓	
81	Mkhomazi Langelihle	10	W	W							W	W						W	W						W	W						W	W			✓	
82	Mkhondo Lethabo	11	W	W							W	W						W	W						W	W						W	W			✓	
83	Mkhonto Oarabile	11	W	W							W	W						W	W						W	W						W	W			✓	
84	Mkhonto Tlotliso	6	W	W							W	W						W	W						W	W						W	W				✓
85	Mkhonto Vernon	9	W	W							W	W						W	W						W	W						W	W				✓
86	Mlombo Elami	9	W	W							W	W						W	W						W	W						W	W			✓	
87	Mndawe Nhlanhlayethu		W	W							W	W						W	W						W	W						W	W				✓
88	Mndawe Stsandiwe	11	W	W							W	W						W	W						W	W						W	W				✓
89	Mnisi Aphiwe	8	W	W							W	W						W	W						W	W						W	W			✓	
90	Mnisi Khwezikazi	8	W	W							W	W						W	W						W	W						W	W				✓
TOTAL NUMBER OF CHILDREN PRESENT																																					
TOTAL NUMBER OF CHILDREN ABSENT																																					

ADJUSTMENTS TO CHANGE IN NUMBER OF CHILDREN		
DESCRIPTION	TOTAL	COMMENTS
1. ADDITIONALS		
2. DROP -OUTS		
3. TRANSFERRED		
4. DECEASED		

N.B* THE TOTALS MUST CROSS BALANCE

MARK WITH: (P, A OR W)

PRESENT
ABSENT
WEEKEND

I DECLARE THAT THE INFORMATION IS CORRECT AND A TRUE REFLECTION

CHAIRPERSON

DATE

PRINCIPAL

DATE

TREASURER

DATE

DEPARTMENTAL REPRESENTATIVE: _____

DATE: _____

DAILY ATTENDANCE REGISTER

ECD NAME: Bethel Crèche & Pre-School

MONTH: October

YEAR: 2032

QUARTER: 4

WARD:

			DAYS OF THE MONTH																															DAYS	DAYS	SUBSIDISED (X OR ✓)	
NO	NAME AND SURNAME	AGE	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	(P)	(A)	YES	NO
91	Mnisi Leon	10	W	W							W	W						W	W						W	W						W	W			✓	
92	Mnisi Nqubeko	7	W	W							W	W						W	W						W	W						W	W			✓	
93	Mnisi Qiniso	11	W	W							W	W						W	W						W	W						W	W				✓
94	Mnisi Royalty	10	W	W							W	W						W	W						W	W						W	W			✓	
95	Mnisi Sithelo	11	W	W							W	W						W	W						W	W						W	W			✓	
96	Mohale Manqoba	10	W	W							W	W						W	W						W	W						W	W			✓	
97	Mokoena Alwande	10	W	W							W	W						W	W						W	W						W	W			✓	
98	Mokoena Itumeleng	11	W	W							W	W						W	W						W	W						W	W			✓	
99	Mokoena Kelebogile	11	W	W							W	W						W	W						W	W						W	W				✓
	Mokoena Melokuhle	10	W	W							W	W						W	W						W	W						W	W			✓	
	Mokoena Mkhululi	9	W	W							W	W						W	W						W	W						W	W			✓	
	Mokoena Neo	10	W	W							W	W						W	W						W	W						W	W			✓	
	Mokoena Sihle	10	W	W							W	W						W	W						W	W						W	W				✓
	Mokoena Siphesihle	10	W	W							W	W						W	W						W	W						W	W			✓	
	Mokoena Thato	10	W	W							W	W						W	W						W	W						W	W				✓
TOTAL NUMBER OF CHILDREN PRESENT																																					
TOTAL NUMBER OF CHILDREN ABSENT																																					

ADJUSTMENTS TO CHANGE IN NUMBER OF CHILDREN		
DESCRIPTION	TOTAL	COMMENTS
1. ADDITIONALS		
2. DROP -OUTS		
3. TRANSFERRED		
4. DECEASED		

N.B* THE TOTALS MUST CROSS BALANCE

MARK WITH: (P, A OR W)

PRESENT
ABSENT
WEEKEND

I DECLARE THAT THE INFORMATION IS CORRECT AND A TRUE REFLECTION

CHAIRPERSON

DATE

PRINCIPAL

DATE

TREASURER

DATE

DEPARTMENTAL REPRESENTATIVE: _____

DATE: _____

DAILY ATTENDANCE REGISTER

ECD NAME: Bethel Crèche & Pre-School

MONTH: October

YEAR: 2032

QUARTER: 4

WARD:

			DAYS OF THE MONTH																															DAYS	DAYS	SUBSIDISED (X OR ✓)	
NO	NAME AND SURNAME	AGE	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	(P)	(A)	YES	NO
	Mona Hlelo	11	W	W							W	W						W	W						W	W						W	W			✓	
	Mona Langaletu	11	W	W							W	W						W	W						W	W						W	W			✓	
	Mona Lwando	10	W	W							W	W						W	W						W	W						W	W				✓
	Mona Melokuhle	9	W	W							W	W						W	W						W	W						W	W				✓
	Mona Mpendulo	11	W	W							W	W						W	W						W	W						W	W			✓	
	Monareng Ziyanda		W	W							W	W						W	W						W	W						W	W				✓
	Morena Kgoshi	8	W	W							W	W						W	W						W	W						W	W				✓
	Moyana Nkazimulo	9	W	W							W	W						W	W						W	W						W	W			✓	
	Msimango Bohlale	10	W	W							W	W						W	W						W	W						W	W			✓	
	Msimango Kamogelo	10	W	W							W	W						W	W						W	W						W	W			✓	
	Nake Amanhle	10	W	W							W	W						W	W						W	W						W	W			✓	
	Nake Rorisang	11	W	W							W	W						W	W						W	W						W	W				✓
	Ndhlakude Botshelo	10	W	W							W	W						W	W						W	W						W	W			✓	
	Ndhlovu Quinton		W	W							W	W						W	W						W	W						W	W				✓
	Ndlovu Ayabonga	11	W	W							W	W						W	W						W	W						W	W			✓	
TOTAL NUMBER OF CHILDREN PRESENT																																					
TOTAL NUMBER OF CHILDREN ABSENT																																					

ADJUSTMENTS TO CHANGE IN NUMBER OF CHILDREN		
DESCRIPTION	TOTAL	COMMENTS
1. ADDITIONALS		
2. DROP -OUTS		
3. TRANSFERRED		
4. DECEASED		

N.B* THE TOTALS MUST CROSS BALANCE

MARK WITH: (P, A OR W)

PRESENT
ABSENT
WEEKEND

I DECLARE THAT THE INFORMATION IS CORRECT AND A TRUE REFLECTION

CHAIRPERSON

DATE

PRINCIPAL

DATE

TREASURER

DATE

DEPARTMENTAL REPRESENTATIVE: _____

DATE: _____

DAILY ATTENDANCE REGISTER

MONTH: October

YEAR: 2032

QUARTER: 4

WARD:

[illegible]

ADJUSMENTS TO CHANGE IN NUMBER OF CHILDREN		
DESCRIPTION	TOTAL	COMMENTS
1. ADDITIONALS		
2. DROP -OUTS		
3. TRANSFERRED		
4. DECEASED		

N.B* THE TOTALS MUST CROSS BALANCE

MARK WITH: (P, A OR W)

I DECLARE THAT THE INFORMATION IS CORRECT AND A TRUE REFLECTION

CHAIRPERSON

PRINCIPAL

TREASURER

DATE _____

DATE _____

DATE _____

DEPARTMENTAL REPRESENTATIVE:

DATE: _____

PRESENT

ABSENT

WEEKEND

DAILY ATTENDANCE REGISTER

ECD NAME: Bethel Crèche & Pre-School

MONTH: October

YEAR: 2032

QUARTER: 4

WARD:

			DAYS OF THE MONTH																															DAYS	DAYS	SUBSIDISED (X OR ✓)	
NO	NAME AND SURNAME	AGE	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	(P)	(A)	YES	NO
	Nkosi Snakekelo	11	W	W							W	W						W	W						W	W						W	W			✓	
	Nkosi Zanokuhle	10	W	W							W	W						W	W						W	W						W	W			✓	
	Nkuna Asiphe	11	W	W							W	W						W	W						W	W						W	W			✓	
	Nkuna Karabo	10	W	W							W	W						W	W						W	W						W	W				✓
	Nobunga Amara	10	W	W							W	W						W	W						W	W						W	W				✓
	Nonyane Nkhosikhona	10	W	W							W	W						W	W						W	W						W	W			✓	
	Nonyane Ocean	10	W	W							W	W						W	W						W	W						W	W				✓
	Ntimba Tumi	10	W	W							W	W						W	W						W	W						W	W				✓
	Nyathikazi Charisma	10	W	W							W	W						W	W						W	W						W	W				✓
	Nyundu Happiness	11	W	W							W	W						W	W						W	W						W	W			✓	
	Ramashia Kingsly	11	W	W							W	W						W	W						W	W						W	W			✓	
	Roberto Itel	11	W	W							W	W						W	W						W	W						W	W				✓
	Sambo Sphokazi	10	W	W							W	W						W	W						W	W						W	W			✓	
	Sedibe Melisa	10	W	W							W	W						W	W						W	W						W	W				✓
	Sengwane Babongile	10	W	W							W	W						W	W						W	W						W	W			✓	
TOTAL NUMBER OF CHILDREN PRESENT																																					
TOTAL NUMBER OF CHILDREN ABSENT																																					

ADJUSTMENTS TO CHANGE IN NUMBER OF CHILDREN		
DESCRIPTION	TOTAL	COMMENTS
1. ADDITIONALS		
2. DROP -OUTS		
3. TRANSFERRED		
4. DECEASED		

N.B* THE TOTALS MUST CROSS BALANCE

MARK WITH: (P, A OR W)

PRESENT
ABSENT
WEEKEND

I DECLARE THAT THE INFORMATION IS CORRECT AND A TRUE REFLECTION

CHAIRPERSON

DATE

PRINCIPAL

DATE

TREASURER

DATE

DEPARTMENTAL REPRESENTATIVE: _____

DATE: _____

DAILY ATTENDANCE REGISTER

ECD NAME: Bethel Crèche & Pre-School

MONTH: October

YEAR: 2032

QUARTER: 4

WARD:

			DAYS OF THE MONTH																															DAYS	DAYS	SUBSIDISED (X OR ✓)	
NO	NAME AND SURNAME	AGE	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	(P)	(A)	YES	NO
	Sengwayo Hlelolwakhe	10	W	W							W	W						W	W						W	W						W	W			✓	
	Shabangu Bonolo	11	W	W							W	W						W	W						W	W						W	W			✓	
	Shabangu Kgopotso	11	W	W							W	W						W	W						W	W						W	W			✓	
	Shabangu Muhluri	11	W	W							W	W						W	W						W	W						W	W			✓	
	Shikaya Lihle	10	W	W							W	W						W	W						W	W						W	W				✓
	Shongwe Lwandile	8	W	W							W	W						W	W						W	W						W	W			✓	
	Sibiya Alwande	11	W	W							W	W						W	W						W	W						W	W				✓
	Sibiya Ziyanda	9	W	W							W	W						W	W						W	W						W	W			✓	
	Sono Onalerona	10	W	W							W	W						W	W						W	W						W	W				✓
	Sundlhane Ntsako	11	W	W							W	W						W	W						W	W						W	W				✓
	Thabethe Angel	11	W	W							W	W						W	W						W	W						W	W				✓
	Thagane Banele		W	W							W	W						W	W						W	W						W	W				✓
	Theko Minenhle	11	W	W							W	W						W	W						W	W						W	W			✓	
	Vandhla Sky	7	W	W							W	W						W	W						W	W						W	W				✓
	Vilakazi Cobolwakhe	8	W	W							W	W						W	W						W	W						W	W				✓
TOTAL NUMBER OF CHILDREN PRESENT																																					
TOTAL NUMBER OF CHILDREN ABSENT																																					

ADJUSTMENTS TO CHANGE IN NUMBER OF CHILDREN		
DESCRIPTION	TOTAL	COMMENTS
1. ADDITIONALS		
2. DROP -OUTS		
3. TRANSFERRED		
4. DECEASED		

N.B* THE TOTALS MUST CROSS BALANCE

MARK WITH: (P, A OR W)

PRESENT
ABSENT
WEEKEND

I DECLARE THAT THE INFORMATION IS CORRECT AND A TRUE REFLECTION

CHAIRPERSON

DATE

PRINCIPAL

DATE

TREASURER

DATE

DEPARTMENTAL REPRESENTATIVE: _____

DATE: _____