

DAILY ATTENDANCE REGISTER

MONTH: August

YEAR: 2036

QUARTER: 3

WARD:

[illegible]

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

MARK WITH: (P, A OR W)

PRESENT
ABSENT
WEEKEND

PRINCIPAL

TREASURER

DATE _____

DATE _____

DATE _____

DEPARTMENTAL REPRESENTATIVE:

DATE: _____

DAILY ATTENDANCE REGISTER

ECD NAME: Bethel Crèche & Pre-School

MONTH: August

YEAR: 2036

QUARTER: 3

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	10	W	W							W	W						W	W						W	W						W	W			✓	
17	Khoza Sbhongokuhle	14	W	W							W	W						W	W						W	W						W	W			✓	
18	Khumalo Fion	14	W	W							W	W						W	W						W	W						W	W			✓	
19	Khumalo Pelliah	14	W	W							W	W						W	W						W	W						W	W			✓	
20	Kiara Sanderson	15	W	W							W	W						W	W						W	W						W	W				✓
21	Lamula Kgodoso	13	W	W							W	W						W	W						W	W						W	W				✓
22	Lawrence Abby	14	W	W							W	W						W	W						W	W						W	W				✓
23	Lawrence Taydén	14	W	W							W	W						W	W						W	W						W	W			✓	
24	Lekhuleni Monde	15	W	W							W	W						W	W						W	W						W	W				✓
25	Lekhuleni Sanele	14	W	W							W	W						W	W						W	W						W	W			✓	
26	Letshane Bothlale	14	W	W							W	W						W	W						W	W						W	W			✓	
27	Leyane Sphiwosethu	13	W	W							W	W						W	W						W	W						W	W				✓
28	Liyam Sanderson	14	W	W							W	W						W	W						W	W						W	W			✓	
29	Lubisi Favour	14	W	W							W	W						W	W						W	W						W	W			✓	
30	Mabila Ubenami	12	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: August

YEAR: 2036

QUARTER: 3

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	15	W	W							W	W						W	W						W	W						W	W			✓	
32	Mahatlani Wakwetsima	15	W	W							W	W						W	W						W	W						W	W			✓	
33	Maila Lisa	12	W	W							W	W						W	W						W	W						W	W			✓	
34	Makola Boikano	14	W	W							W	W						W	W						W	W						W	W			✓	
35	Makwela Charisma	14	W	W							W	W						W	W						W	W						W	W			✓	
36	Malete Nkazimulo	15	W	W							W	W						W	W						W	W						W	W				✓
37	Malope Lerumo	14	W	W							W	W						W	W						W	W						W	W			✓	
38	Maluleke Enelo	13	W	W							W	W						W	W						W	W						W	W				✓
39	Maluleke Gendo	11	W	W							W	W						W	W						W	W						W	W				✓
40	Malumane Hlelokuhle	15	W	W							W	W						W	W						W	W						W	W				✓
41	Manhique Keitumetsi	14	W	W							W	W						W	W						W	W						W	W				✓
42	Manzini Andzani	15	W	W							W	W						W	W						W	W						W	W				✓
43	Maphanga Dumisile	15	W	W							W	W						W	W						W	W						W	W				✓
44	Marula Bokamosa	14	W	W							W	W						W	W						W	W						W	W			✓	
45	Maseko Onalerona	14	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: August

YEAR: 2036

QUARTER: 3

WARD:

ED NAME: Bethel Creche & Pre-School			MONTH: August										YEAR: 2020										QUARTER: 3										WARD: 1		SUBSIDISED				
			DAYS OF THE MONTH																															DAYS	DAYS	(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		
46	Mashabane Atlehang	14	W	W							W	W						W	W						W	W						W	W				✓		
47	Mashabane Nhlabulo	14	W	W							W	W						W	W						W	W						W	W				✓		
48	Mashabane Priyanka	14	W	W							W	W						W	W						W	W						W	W					✓	
49	Mashego Princess	14	W	W							W	W						W	W						W	W						W	W				✓		
50	Mashigo Asemahle	14	W	W							W	W						W	W						W	W						W	W				✓		
51	Mashile Opelong	11	W	W							W	W						W	W						W	W						W	W					✓	
52	Masuku Lwandile	14	W	W							W	W						W	W						W	W						W	W				✓		
53	Masuku Unathi	14	W	W							W	W						W	W						W	W						W	W				✓		
54	Mathebula Nhlanhla	15	W	W							W	W						W	W						W	W						W	W					✓	
55	Mathebula Thandolwethu	11	W	W							W	W						W	W						W	W						W	W					✓	
56	Mathibela Phetho	14	W	W							W	W						W	W						W	W						W	W					✓	
57	Matsane Greyson	14	W	W							W	W						W	W						W	W						W	W					✓	
58	Matsane Ofentse	13	W	W							W	W						W	W						W	W						W	W					✓	
59	Mazibane Gemini	13	W	W							W	W						W	W						W	W						W	W				✓		
60	Mbiza Lwandile	16	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: August

YEAR: 2036

QUARTER: 3

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	14	W	W							W	W						W	W						W	W						W	W				✓		
62	Mdluli Ayama	14	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	13	W	W							W	W						W	W						W	W						W	W				✓		
66	Methula Ayama	13	W	W							W	W						W	W						W	W						W	W				✓		
67	Mgiba Nsika	13	W	W							W	W						W	W						W	W						W	W				✓		
68	Mgibe Tshego	14	W	W							W	W						W	W						W	W						W	W					✓	
69	Mgwenya Bayandile	13	W	W							W	W						W	W						W	W						W	W				✓		
70	Mgwenya Mellod	15	W	W							W	W						W	W						W	W						W	W				✓		
71	Mgwenya Nonhle	15	W	W							W	W						W	W						W	W						W	W					✓	
72	Mgwenya Smamukele	15	W	W							W	W						W	W						W	W						W	W					✓	
73	Mhaule Langelihle	15	W	W							W	W						W	W						W	W						W	W					✓	
74	Mhlaba Brianna	13	W	W							W	W						W	W						W	W						W	W				✓		
75	Mhlanga Marquisa	12	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: August

YEAR: 2036

QUARTER: 3

WARD:

ED NAME: Bethel Creche & Pre-School			MONTH: August										YEAR: 2020										QUARTER: 3										WARD: 1		SUBSIDISED		
			DAYS OF THE MONTH																															DAYS	DAYS	(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	13	W	W							W	W						W	W						W	W						W	W				✓
77	Mkhabela Sphokuhle	14	W	W							W	W						W	W						W	W						W	W			✓	
78	Mkhabela Tirani	13	W	W							W	W						W	W						W	W						W	W			✓	
79	Mkhabela Tiyani	14	W	W							W	W						W	W						W	W						W	W				✓
80	Mkhantswa Langelihle	12	W	W							W	W						W	W						W	W						W	W			✓	
81	Mkhomazi Langelihle	14	W	W							W	W						W	W						W	W						W	W			✓	
82	Mkhondo Lethabo	15	W	W							W	W						W	W						W	W						W	W			✓	
83	Mkhonto Oarabile	14	W	W							W	W						W	W						W	W						W	W			✓	
84	Mkhonto Tlotliso	10	W	W							W	W						W	W						W	W						W	W				✓
85	Mkhonto Vernon	13	W	W							W	W						W	W						W	W						W	W				✓
86	Mlombo Elami	13	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 Stsandziwe	15	W	W							W	W						W	W						W	W						W	W				✓
89	Mnisi Aphiwe	12	W	W							W	W						W	W						W	W						W	W			✓	
90	Mnisi Khwezikazi	12	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: August

YEAR: 2036

QUARTER: 3

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	14	W	W							W	W						W	W						W	W						W	W			✓	
92	Mnisi Nqubeko	10	W	W							W	W						W	W						W	W						W	W			✓	
93	Mnisi Qiniso	15	W	W							W	W						W	W						W	W						W	W				✓
94	Mnisi Royalty	14	W	W							W	W						W	W						W	W						W	W			✓	
95	Mnisi Sithelo	15	W	W							W	W						W	W						W	W						W	W			✓	
96	Mohale Manqoba	14	W	W							W	W						W	W						W	W						W	W			✓	
97	Mokoena Alwande	14	W	W							W	W						W	W						W	W						W	W			✓	
98	Mokoena Itumeleng	14	W	W							W	W						W	W						W	W						W	W			✓	
99	Mokoena Kelebogile	15	W	W							W	W						W	W						W	W						W	W				✓
	Mokoena Melokuhle	14	W	W							W	W						W	W						W	W						W	W			✓	
	Mokoena Mkhululi	13	W	W							W	W						W	W						W	W						W	W			✓	
	Mokoena Neo	14	W	W							W	W						W	W						W	W						W	W			✓	
	Mokoena Sihle	14	W	W							W	W						W	W						W	W						W	W				✓
	Mokoena Siphesihle	13	W	W							W	W						W	W						W	W						W	W			✓	
	Mokoena Thato	14	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: August

YEAR: 2036

QUARTER: 3

WARD:

ED NAME: Bethel Creche & Pre-School			MONTH: August														YEAR: 2020														QUARTER: 3														WARD: 1				SUBSIDISED	
			DAYS OF THE MONTH														DAYS		DAYS		(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	14	W	W							W	W						W	W						W	W						W	W			✓														
	Mona Langaletu	14	W	W							W	W						W	W						W	W						W	W			✓														
	Mona Lwando	14	W	W							W	W						W	W						W	W						W	W				✓													
	Mona Melokuhle	13	W	W							W	W						W	W						W	W						W	W				✓													
	Mona Mpendulo	15	W	W							W	W						W	W						W	W						W	W			✓														
	Monareng Ziyanda		W	W							W	W						W	W						W	W						W	W				✓													
	Morena Kgoshi	12	W	W							W	W						W	W						W	W						W	W				✓													
	Moyana Nkazimulo	13	W	W							W	W						W	W						W	W						W	W			✓														
	Msimango Bohlale	14	W	W							W	W						W	W						W	W						W	W			✓														
	Msimango Kamogelo	14	W	W							W	W						W	W						W	W						W	W			✓														
	Nake Amanhle	14	W	W							W	W						W	W						W	W						W	W			✓														
	Nake Rorisang	15	W	W							W	W						W	W						W	W						W	W				✓													
	Ndhlakude Botshelo	14	W	W							W	W						W	W						W	W						W	W			✓														
	Ndhlovu Quinton		W	W							W	W						W	W						W	W						W	W				✓													
	Ndlovu Ayabonga	14	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: August

YEAR: 2036

QUARTER: 3

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
	Ngobe William	13	W	W							W	W						W	W						W	W						W	W				✓
	Ngobe Zanenkosi	13	W	W							W	W						W	W						W	W						W	W				✓
	Ngobeni Clade	13	W	W							W	W						W	W						W	W						W	W				✓
	Ngobeni Clayde	13	W	W							W	W						W	W						W	W						W	W				✓
	Ngomane Linhle	14	W	W							W	W						W	W						W	W						W	W			✓	
	Ngomane Phiwokuhle	14	W	W							W	W						W	W						W	W						W	W			✓	
	Ngomane Zanothando	14	W	W							W	W						W	W						W	W						W	W			✓	
	Ngungu Lennon	12	W	W							W	W						W	W						W	W						W	W			✓	
	Ngwenya Liam	13	W	W							W	W						W	W						W	W						W	W				✓
	Ngwenya Mvelo	13	W	W							W	W						W	W						W	W						W	W				✓
	Ngwenya Terrian	14	W	W							W	W						W	W						W	W						W	W				✓
	Nkambule Minenhle	14	W	W							W	W						W	W						W	W						W	W			✓	
	Nkosi Enzokuhle	15	W	W							W	W						W	W						W	W						W	W			✓	
	Nkosi Lebone Pearl	13	W	W							W	W						W	W						W	W						W	W			✓	
	Nkosi Sinokuhle	14	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: August

YEAR: 2036

QUARTER: 3

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	14	W	W							W	W						W	W						W	W						W	W			✓	
	Nkosi Zanokuhle	14	W	W							W	W						W	W						W	W						W	W			✓	
	Nkuna Asiphe	15	W	W							W	W						W	W						W	W						W	W			✓	
	Nkuna Karabo	14	W	W							W	W						W	W						W	W						W	W				✓
	Nobunga Amara	14	W	W							W	W						W	W						W	W						W	W				✓
	Nonyane Nkhosikhona	14	W	W							W	W						W	W						W	W						W	W			✓	
	Nonyane Ocean	14	W	W							W	W						W	W						W	W						W	W				✓
	Ntimba Tumi	14	W	W							W	W						W	W						W	W						W	W				✓
	Nyathikazi Charisma	14	W	W							W	W						W	W						W	W						W	W				✓
	Nyundu Happiness	15	W	W							W	W						W	W						W	W						W	W			✓	
	Ramashia Kingsly	15	W	W							W	W						W	W						W	W						W	W			✓	
	Roberto Itel	15	W	W							W	W						W	W						W	W						W	W				✓
	Sambo Sphokazi	14	W	W							W	W						W	W						W	W						W	W			✓	
	Sedibe Melisa	14	W	W							W	W						W	W						W	W						W	W				✓
	Sengwane Babongile	14	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: August

YEAR: 2036

QUARTER: 3

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	13	W	W							W	W						W	W						W	W						W	W			✓	
	Shabangu Bonolo	14	W	W							W	W						W	W						W	W						W	W			✓	
	Shabangu Kgopotso	15	W	W							W	W						W	W						W	W						W	W			✓	
	Shabangu Muhluri	15	W	W							W	W						W	W						W	W						W	W			✓	
	Shikaya Lihle	14	W	W							W	W						W	W						W	W						W	W				✓
	Shongwe Lwandile	12	W	W							W	W						W	W						W	W						W	W			✓	
	Sibiya Alwande	15	W	W							W	W						W	W						W	W						W	W				✓
	Sibiya Ziyanda	13	W	W							W	W						W	W						W	W						W	W			✓	
	Sono Onalerona	14	W	W							W	W						W	W						W	W						W	W				✓
	Sundlhane Ntsako	15	W	W							W	W						W	W						W	W						W	W				✓
	Thabethe Angel	14	W	W							W	W						W	W						W	W						W	W				✓
	Thagane Banele		W	W							W	W						W	W						W	W						W	W				✓
	Theko Minenhle	14	W	W							W	W						W	W						W	W						W	W			✓	
	Vandhla Sky	11	W	W							W	W						W	W						W	W						W	W				✓
	Vilakazi Cobolwakhe	12	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: _____