

DAILY ATTENDANCE REGISTER

ECD NAME: Bethel Crèche & Pre-School

MONTH: March

YEAR: 2058

QUARTER: 1

WARD:

SCHOOL NAME: Bether Creche & Pre-School			MONTH: March			YEAR: 2025			QUARTER: 1			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
1	Botha Liam		35	W	W							W	W						W	W				W		W	W						W	W			✓	
2	Chabata Aliyah		36	W	W							W	W						W	W				W		W	W						W	W			✓	
3	Chiloane Zanoxolo		36	W	W							W	W						W	W				W		W	W						W	W			✓	
4	Credo Mashaba		35	W	W							W	W						W	W				W		W	W						W	W				
5	Devese Kairo		35	W	W							W	W						W	W				W		W	W						W	W				✓
6	Dibakwane Bokang		35	W	W							W	W						W	W				W		W	W						W	W			✓	
7	Dlamini Sithelakuhla		36	W	W							W	W						W	W				W		W	W						W	W			✓	
8	Dube Anele		36	W	W							W	W						W	W				W		W	W						W	W			✓	
9	Dube Junior		34	W	W							W	W						W	W				W		W	W						W	W			✓	
10	Dube Zanokuhle			W	W							W	W						W	W				W		W	W						W	W				✓
11	Fakude Lethothule		33	W	W							W	W						W	W				W		W	W						W	W				✓
12	Fakude Simthandile		36	W	W							W	W						W	W				W		W	W						W	W			✓	
13	Fankomo Lazoya		35	W	W							W	W						W	W				W		W	W						W	W			✓	
14	Hobyane Mikhenso		33	W	W							W	W						W	W				W		W	W						W	W				✓
15	Kgoedi Melokuhle		36	W	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: March

YEAR: 2058

QUARTER: 1

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	32	W	W							W	W						W	W				W		W	W						W	W			✓	
17	Khoza Sbhongokuhle	35	W	W							W	W						W	W				W		W	W						W	W			✓	
18	Khumalo Fion	35	W	W							W	W						W	W				W		W	W						W	W			✓	
19	Khumalo Pelliah	36	W	W							W	W						W	W				W		W	W						W	W			✓	
20	Kiara Sanderson	37	W	W							W	W						W	W				W		W	W						W	W				✓
21	Lamula Kgodoso	35	W	W							W	W						W	W				W		W	W						W	W				✓
22	Lawrence Abby	35	W	W							W	W						W	W				W		W	W						W	W				✓
23	Lawrence Taydén	35	W	W							W	W						W	W				W		W	W						W	W			✓	
24	Lekhuleni Monde	37	W	W							W	W						W	W				W		W	W						W	W				✓
25	Lekhuleni Sanele	36	W	W							W	W						W	W				W		W	W						W	W			✓	
26	Letshane Bothlale	35	W	W							W	W						W	W				W		W	W						W	W			✓	
27	Leyane Sphiwosethu	34	W	W							W	W						W	W				W		W	W						W	W				✓
28	Liyam Sanderson	35	W	W							W	W						W	W				W		W	W						W	W			✓	
29	Lubisi Favour	36	W	W							W	W						W	W				W		W	W						W	W			✓	
30	Mabila Ubenami	33	W	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: March

YEAR: 2058

QUARTER: 1

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

WARD:

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: March

YEAR: 2058

QUARTER: 1

WARD:

SCHOOL NAME: Duter Creche & Pre-School			MONTH: March										YEAR: 2025										QUARTER: 1										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							
61	Mchulu Rhulane	35		W	W						W	W						W	W				W		W	W						W	W				✓							
62	Mdluli Ayama	36		W	W						W	W						W	W				W		W	W						W	W				✓							
63	Mdluli Kayton			W	W						W	W						W	W				W		W	W						W	W					✓						
64	Mdluli Mpho			W	W						W	W						W	W				W		W	W						W	W					✓						
65	Mdluli Olwethu	35		W	W						W	W						W	W				W		W	W						W	W				✓							
66	Methula Ayama	35		W	W						W	W						W	W				W		W	W						W	W				✓							
67	Mgiba Nsika	35		W	W						W	W						W	W				W		W	W						W	W				✓							
68	Mgibe Tshego	36		W	W						W	W						W	W				W		W	W						W	W					✓						
69	Mgwenya Bayandile	35		W	W						W	W						W	W				W		W	W						W	W				✓							
70	Mgwenya Mellod	37		W	W						W	W						W	W				W		W	W						W	W				✓							
71	Mgwenya Nonhle	37		W	W						W	W						W	W				W		W	W						W	W					✓						
72	Mgwenya Smamukele	37		W	W						W	W						W	W				W		W	W						W	W					✓						
73	Mhaule Langelihle	36		W	W						W	W						W	W				W		W	W						W	W					✓						
74	Mhlaba Brianna	35		W	W						W	W						W	W				W		W	W						W	W				✓							
75	Mhlanga Marquisa	33		W	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: March

YEAR: 2058

QUARTER: 1

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	35	W	W							W	W						W	W				W		W	W						W	W				✓
77	Mkhabela Sphokuhle	36	W	W							W	W						W	W				W		W	W						W	W			✓	
78	Mkhabela Tirani	35	W	W							W	W						W	W				W		W	W						W	W			✓	
79	Mkhabela Tiyani	36	W	W							W	W						W	W				W		W	W						W	W				✓
80	Mkhantswa Langelihle	33	W	W							W	W						W	W				W		W	W						W	W			✓	
81	Mkhomazi Langelihle	35	W	W							W	W						W	W				W		W	W						W	W			✓	
82	Mkhondo Lethabo	36	W	W							W	W						W	W				W		W	W						W	W			✓	
83	Mkhonto Oarabile	36	W	W							W	W						W	W				W		W	W						W	W			✓	
84	Mkhonto Tlotliso	32	W	W							W	W						W	W				W		W	W						W	W				✓
85	Mkhonto Vernon	34	W	W							W	W						W	W				W		W	W						W	W				✓
86	Mlombo Elami	35	W	W							W	W						W	W				W		W	W						W	W			✓	
87	Mndawe Nhlanhlayethu		W	W							W	W						W	W				W		W	W						W	W				✓
88	Mndawe Stsandiwe	37	W	W							W	W						W	W				W		W	W						W	W				✓
89	Mnisi Aphiwe	33	W	W							W	W						W	W				W		W	W						W	W			✓	
90	Mnisi Khwezikazi	33	W	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: March

YEAR: 2058

QUARTER: 1

WARD:

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: March

YEAR: 2058

QUARTER: 1

WARD:

ED NAME: Bethel Creche & Pre-School			MONTH: March			YEAR: 2023			QUARTER: 1			WARD: 1																				DAYS	DAYS	SUBSIDISED (X OR ✓)							
				DAYS OF THE MONTH																																					
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		36	W	W							W	W						W	W				W		W	W						W	W				✓			
	Mona Langaletu		36	W	W							W	W						W	W				W		W	W						W	W				✓			
	Mona Lwando		36	W	W							W	W						W	W				W		W	W						W	W					✓		
	Mona Melokuhle		34	W	W							W	W						W	W				W		W	W						W	W					✓		
	Mona Mpendulo		37	W	W							W	W						W	W				W		W	W						W	W				✓			
	Monareng Ziyanda			W	W							W	W						W	W				W		W	W						W	W					✓		
	Morena Kgoshi		33	W	W							W	W						W	W				W		W	W						W	W					✓		
	Moyana Nkazimulo		35	W	W							W	W						W	W				W		W	W						W	W					✓		
	Msimango Bohlale		35	W	W							W	W						W	W				W		W	W						W	W					✓		
	Msimango Kamogelo		35	W	W							W	W						W	W				W		W	W						W	W					✓		
	Nake Amanhle		36	W	W							W	W						W	W				W		W	W						W	W					✓		
	Nake Rorisang		36	W	W							W	W						W	W				W		W	W						W	W						✓	
	Ndhlakude Botshelo		35	W	W							W	W						W	W				W		W	W						W	W					✓		
	Ndhlovu Quinton			W	W							W	W						W	W				W		W	W						W	W						✓	
	Ndlovu Ayabonga		36	W	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: March

YEAR: 2058

QUARTER: 1

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	35	W	W							W	W						W	W				W		W	W						W	W				✓
	Ngobe Zanenkosi	35	W	W							W	W						W	W				W		W	W						W	W				✓
	Ngobeni Clade	34	W	W							W	W						W	W				W		W	W						W	W				✓
	Ngobeni Clayde	34	W	W							W	W						W	W				W		W	W						W	W				✓
	Ngomane Linhle	36	W	W							W	W						W	W				W		W	W						W	W			✓	
	Ngomane Phiwokuhle	36	W	W							W	W						W	W				W		W	W						W	W			✓	
	Ngomane Zanothando	36	W	W							W	W						W	W				W		W	W						W	W			✓	
	Ngungu Lennon	33	W	W							W	W						W	W				W		W	W						W	W			✓	
	Ngwenya Liam	35	W	W							W	W						W	W				W		W	W						W	W				✓
	Ngwenya Mvelo	35	W	W							W	W						W	W				W		W	W						W	W				✓
	Ngwenya Terrian	35	W	W							W	W						W	W				W		W	W						W	W				✓
	Nkambule Minenhle	35	W	W							W	W						W	W				W		W	W						W	W			✓	
	Nkosi Enzokuhle	36	W	W							W	W						W	W				W		W	W						W	W			✓	
	Nkosi Lebone Pearl	35	W	W							W	W						W	W				W		W	W						W	W			✓	
	Nkosi Sinokuhle	36	W	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: March

YEAR: 2058

QUARTER: 1

WARD:

SCHOOL NAME: DUTER CRECHE & P/RE SCHOOL			MONTH: March			YEAR: 2023			QUARTER: 1			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	
	Nkosi Snakekelo	36		W	W						W	W						W	W				W		W	W						W	W				✓	
	Nkosi Zanokuhle	35		W	W						W	W						W	W				W		W	W						W	W				✓	
	Nkuna Asiphe	37		W	W						W	W						W	W				W		W	W						W	W				✓	
	Nkuna Karabo	36		W	W						W	W						W	W				W		W	W						W	W				✓	
	Nobunga Amara	35		W	W						W	W						W	W				W		W	W						W	W				✓	
	Nonyane Nkhosikhona	36		W	W						W	W						W	W				W		W	W						W	W				✓	
	Nonyane Ocean	35		W	W						W	W						W	W				W		W	W						W	W				✓	
	Ntimba Tumi	36		W	W						W	W						W	W				W		W	W						W	W				✓	
	Nyathikazi Charisma	36		W	W						W	W						W	W				W		W	W						W	W				✓	
	Nyundu Happiness	37		W	W						W	W						W	W				W		W	W						W	W				✓	
	Ramashia Kingsly	36		W	W						W	W						W	W				W		W	W						W	W				✓	
	Roberto Itel	37		W	W						W	W						W	W				W		W	W						W	W				✓	
	Sambo Sphokazi	36		W	W						W	W						W	W				W		W	W						W	W				✓	
	Sedibe Melisa	36		W	W						W	W						W	W				W		W	W						W	W				✓	
	Sengwane Babongile	35		W	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: March

YEAR: 2058

QUARTER: 1

WARD:

SCHOOL NAME: Bethel Creche & Pre-School			MONTH: March			YEAR: 2025			QUARTER: 1			WARD: 1																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																														
---	--	--	--------------	--	--	------------	--	--	------------	--	--	---------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

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: _____