

DAILY ATTENDANCE REGISTER

ECD NAME: Bethel Crèche & Pre-School

MONTH: May

YEAR: 2063

QUARTER: 2

WARD:

			DAYS OF THE MONTH																															DAYS	DAYS	SUBSIDISED		
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	40	W				W	W						W	W						W	W						W	W								✓	
2	Chabata Aliyah	41	W				W	W						W	W						W	W						W	W								✓	
3	Chiloane Zanoxolo	41	W				W	W						W	W						W	W						W	W								✓	
4	Credo Mashaba	41	W				W	W						W	W						W	W						W	W									
5	Devese Kairo	41	W				W	W						W	W						W	W						W	W									✓
6	Dibakwane Bokang	41	W				W	W						W	W						W	W						W	W								✓	
7	Dlamini Sithelakuhla	41	W				W	W						W	W						W	W						W	W								✓	
8	Dube Anele	41	W				W	W						W	W						W	W						W	W								✓	
9	Dube Junior	39	W				W	W						W	W						W	W						W	W								✓	
10	Dube Zanokuhle		W				W	W						W	W						W	W						W	W									✓
11	Fakude Lethotuhle	39	W				W	W						W	W						W	W						W	W									✓
12	Fakude Simthandile	41	W				W	W						W	W						W	W						W	W								✓	
13	Fankomo Lazoya	40	W				W	W						W	W						W	W						W	W								✓	
14	Hobyane Mikhenso	38	W				W	W						W	W						W	W						W	W									✓
15	Kgoedi Melokuhle	41	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: May

YEAR: 2063

QUARTER: 2

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	37	W				W	W						W	W						W	W						W	W							✓	
17	Khoza Sbhongokuhle	40	W				W	W						W	W						W	W						W	W							✓	
18	Khumalo Fion	40	W				W	W						W	W						W	W						W	W							✓	
19	Khumalo Pelliah	41	W				W	W						W	W						W	W						W	W							✓	
20	Kiara Sanderson	42	W				W	W						W	W						W	W						W	W								✓
21	Lamula Kgodoso	40	W				W	W						W	W						W	W						W	W								✓
22	Lawrence Abby	41	W				W	W						W	W						W	W						W	W								✓
23	Lawrence Taydén	41	W				W	W						W	W						W	W						W	W							✓	
24	Lekhuleni Monde	42	W				W	W						W	W						W	W						W	W								✓
25	Lekhuleni Sanele	41	W				W	W						W	W						W	W						W	W							✓	
26	Letshane Bothlale	40	W				W	W						W	W						W	W						W	W							✓	
27	Leyane Sphiwosethu	39	W				W	W						W	W						W	W						W	W								✓
28	Liyam Sanderson	40	W				W	W						W	W						W	W						W	W							✓	
29	Lubisi Favour	41	W				W	W						W	W						W	W						W	W							✓	
30	Mabila Ubenami	39	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: May

YEAR: 2063

QUARTER: 2

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: May

YEAR: 2063

QUARTER: 2

WARD:

			DAYS OF THE MONTH																															DAYS	DAYS	SUBSIDISED	
			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
NO	NAME AND SURNAME	AGE																																			
46	Mashabane Atlehang	41	W				W	W						W	W						W	W						W	W							✓	
47	Mashabane Nhlabulo	41	W				W	W						W	W						W	W						W	W							✓	
48	Mashabane Priyanka	41	W				W	W						W	W						W	W						W	W								✓
49	Mashego Princess	41	W				W	W						W	W						W	W						W	W							✓	
50	Mashigo Asemahle	40	W				W	W						W	W						W	W						W	W							✓	
51	Mashile Opelong	38	W				W	W						W	W						W	W						W	W								✓
52	Masuku Lwandile	41	W				W	W						W	W						W	W						W	W							✓	
53	Masuku Unathi	41	W				W	W						W	W						W	W						W	W							✓	
54	Mathebula Nhlanhla	42	W				W	W						W	W						W	W						W	W								✓
55	Mathebula Thandolwethu	38	W				W	W						W	W						W	W						W	W								✓
56	Mathibela Phetho	41	W				W	W						W	W						W	W						W	W								✓
57	Matsane Greyson	41	W				W	W						W	W						W	W						W	W								✓
58	Matsane Ofentse	40	W				W	W						W	W						W	W						W	W								✓
59	Mazibane Gemini	40	W				W	W						W	W						W	W						W	W							✓	
60	Mbiza Lwandile	42	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: May

YEAR: 2063

QUARTER: 2

WARD:

ED NAME: Bethel Creche & Pre-School			MONTH: May										YEAR: 2023										QUARTER: 2										WARD: 1										DAYS	DAYS	SUBSIDISED (X OR ✓)	
			DAYS OF THE MONTH																															DAYS	DAYS											
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 Rhlane	41	W				W	W						W	W						W	W						W	W								✓									
62	Mdluli Ayama	41	W				W	W						W	W						W	W						W	W								✓									
63	Mdluli Kayton		W				W	W						W	W						W	W						W	W								✓									
64	Mdluli Mpho		W				W	W						W	W						W	W						W	W								✓									
65	Mdluli Olwethu	40	W				W	W						W	W						W	W						W	W								✓									
66	Methula Ayama	40	W				W	W						W	W						W	W						W	W								✓									
67	Mgiba Nsika	40	W				W	W						W	W						W	W						W	W								✓									
68	Mgibe Tshego	41	W				W	W						W	W						W	W						W	W									✓								
69	Mgwenya Bayandile	40	W				W	W						W	W						W	W						W	W								✓									
70	Mgwenya Mellod	42	W				W	W						W	W						W	W						W	W								✓									
71	Mgwenya Nonhle	42	W				W	W						W	W						W	W						W	W									✓								
72	Mgwenya Smamukele	42	W				W	W						W	W						W	W						W	W									✓								
73	Mhaule Langelihle	41	W				W	W						W	W						W	W						W	W									✓								
74	Mhlaba Brianna	40	W				W	W						W	W						W	W						W	W								✓									
75	Mhlanga Marquisa	39	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: May

YEAR: 2063

QUARTER: 2

WARD:

			DAYS OF THE MONTH																															DAYS	DAYS	SUBSIDISED			
																																		(P)	(A)	(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			YES	NO		
76	Milazi Wandile	40	W				W	W						W	W						W	W						W	W									✓	
77	Mkhabela Sphokuhle	41	W				W	W						W	W						W	W						W	W								✓		
78	Mkhabela Tirani	40	W				W	W						W	W						W	W						W	W								✓		
79	Mkhabela Tiyani	41	W				W	W						W	W						W	W						W	W									✓	
80	Mkhantswa Langelihle	39	W				W	W						W	W						W	W						W	W								✓		
81	Mkhomazi Langelihle	41	W				W	W						W	W						W	W						W	W								✓		
82	Mkhondo Lethabo	41	W				W	W						W	W						W	W						W	W								✓		
83	Mkhonto Oarabile	41	W				W	W						W	W						W	W						W	W								✓		
84	Mkhonto Tlotliso	37	W				W	W						W	W						W	W						W	W									✓	
85	Mkhonto Vernon	39	W				W	W						W	W						W	W						W	W									✓	
86	Mlombo Elami	40	W				W	W						W	W						W	W						W	W								✓		
87	Mndawe Nhlanhlayethu		W				W	W						W	W						W	W						W	W									✓	
88	Mndawe Stsandiwe	42	W				W	W						W	W						W	W						W	W									✓	
89	Mnisi Aphiwe	39	W				W	W						W	W						W	W						W	W								✓		
90	Mnisi Khwezikazi	39	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: May

YEAR: 2063

QUARTER: 2

WARD:

SCHOOL NAME: Beller Creche & Pre-School			MONTH: May										YEAR: 2023										QUARTER: 2										WARD: 1										SUBSIDISED (X OR ✓)	
			DAYS OF THE MONTH																															DAYS	DAYS									
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	41	W				W	W						W	W						W	W						W	W								✓							
92	Mnisi Nqubeko	37	W				W	W						W	W						W	W						W	W								✓							
93	Mnisi Qiniso	42	W				W	W						W	W						W	W						W	W									✓						
94	Mnisi Royalty	41	W				W	W						W	W						W	W						W	W								✓							
95	Mnisi Sithelo	42	W				W	W						W	W						W	W						W	W								✓							
96	Mohale Manqoba	41	W				W	W						W	W						W	W						W	W								✓							
97	Mokoena Alwande	41	W				W	W						W	W						W	W						W	W								✓							
98	Mokoena Itumeleng	41	W				W	W						W	W						W	W						W	W								✓							
99	Mokoena Kelebogile	42	W				W	W						W	W						W	W						W	W									✓						
	Mokoena Melokuhle	41	W				W	W						W	W						W	W						W	W								✓							
	Mokoena Mkhululi	40	W				W	W						W	W						W	W						W	W								✓							
	Mokoena Neo	41	W				W	W						W	W						W	W						W	W								✓							
	Mokoena Sihle	41	W				W	W						W	W						W	W						W	W									✓						
	Mokoena Siphesihle	40	W				W	W						W	W						W	W						W	W								✓							
	Mokoena Thato	41	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: May

YEAR: 2063

QUARTER: 2

WARD:

ED NAME: Bethel Creche & Pre-School			MONTH: May										YEAR: 2023										QUARTER: 2										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	41	W				W	W						W	W						W	W						W	W								✓							
	Mona Langaletu	41	W				W	W						W	W						W	W						W	W								✓							
	Mona Lwando	41	W				W	W						W	W						W	W						W	W									✓						
	Mona Melokuhle	40	W				W	W						W	W						W	W						W	W									✓						
	Mona Mpendulo	42	W				W	W						W	W						W	W						W	W								✓							
	Monareng Ziyanda		W				W	W						W	W						W	W						W	W									✓						
	Morena Kgoshi	38	W				W	W						W	W						W	W						W	W									✓						
	Moyana Nkazimulo	40	W				W	W						W	W						W	W						W	W									✓						
	Msimango Bohlale	41	W				W	W						W	W						W	W						W	W									✓						
	Msimango Kamogelo	41	W				W	W						W	W						W	W						W	W									✓						
	Nake Amanhle	41	W				W	W						W	W						W	W						W	W									✓						
	Nake Rorisang	42	W				W	W						W	W						W	W						W	W										✓					
	Ndhlakude Botshelo	40	W				W	W						W	W						W	W						W	W									✓						
	Ndhlovu Quinton		W				W	W						W	W						W	W						W	W										✓					
	Ndlovu Ayabonga	41	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: May

YEAR: 2063

QUARTER: 2

WARD:

			DAYS OF THE MONTH																															DAYS	DAYS	SUBSIDISED		
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	40	W				W	W						W	W						W	W						W	W									✓
	Ngobe Zanenkosi	40	W				W	W						W	W						W	W						W	W									✓
	Ngobeni Clade	39	W				W	W						W	W						W	W						W	W									✓
	Ngobeni Clayde	39	W				W	W						W	W						W	W						W	W									✓
	Ngomane Linhle	41	W				W	W						W	W						W	W						W	W									✓
	Ngomane Phiwokuhle	41	W				W	W						W	W						W	W						W	W									✓
	Ngomane Zanothando	41	W				W	W						W	W						W	W						W	W									✓
	Ngungu Lennon	38	W				W	W						W	W						W	W						W	W									✓
	Ngwenya Liam	40	W				W	W						W	W						W	W						W	W									✓
	Ngwenya Mvelo	40	W				W	W						W	W						W	W						W	W									✓
	Ngwenya Terrian	40	W				W	W						W	W						W	W						W	W									✓
	Nkambule Minenhle	41	W				W	W						W	W						W	W						W	W									✓
	Nkosi Enzokuhle	41	W				W	W						W	W						W	W						W	W									✓
	Nkosi Lebone Pearl	40	W				W	W						W	W						W	W						W	W									✓
	Nkosi Sinokuhle	41	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: May

YEAR: 2063

QUARTER: 2

WARD:

CD NAME: Dettler Creche & Pre-School			MONTH: May										YEAR: 2023										QUARTER: 2										WARD:		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	41	W				W	W						W	W						W	W						W	W								✓			
	Nkosi Zanokuhle	40	W				W	W						W	W						W	W						W	W								✓			
	Nkuna Asiphe	42	W				W	W						W	W						W	W						W	W								✓			
	Nkuna Karabo	41	W				W	W						W	W						W	W						W	W									✓		
	Nobunga Amara	40	W				W	W						W	W						W	W						W	W									✓		
	Nonyane Nkhosikhona	41	W				W	W						W	W						W	W						W	W								✓			
	Nonyane Ocean	41	W				W	W						W	W						W	W						W	W									✓		
	Ntimba Tumi	41	W				W	W						W	W						W	W						W	W									✓		
	Nyathikazi Charisma	41	W				W	W						W	W						W	W						W	W									✓		
	Nyundu Happiness	42	W				W	W						W	W						W	W						W	W								✓			
	Ramashia Kingsly	41	W				W	W						W	W						W	W						W	W									✓		
	Roberto Itel	42	W				W	W						W	W						W	W						W	W										✓	
	Sambo Sphokazi	41	W				W	W						W	W						W	W						W	W									✓		
	Sedibe Melisa	41	W				W	W						W	W						W	W						W	W										✓	
	Sengwane Babongile	40	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: May

YEAR: 2063

QUARTER: 2

WARD:

			DAYS OF THE MONTH																															DAYS	DAYS	SUBSIDISED		
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	40	W				W	W						W	W						W	W						W	W								✓	
	Shabangu Bonolo	41	W				W	W						W	W						W	W						W	W								✓	
	Shabangu Kgopotso	41	W				W	W						W	W						W	W						W	W								✓	
	Shabangu Muhluri	41	W				W	W						W	W						W	W						W	W								✓	
	Shikaya Lihle	41	W				W	W						W	W						W	W						W	W								✓	
	Shongwe Lwandile	39	W				W	W						W	W						W	W						W	W								✓	
	Sibiya Alwande	42	W				W	W						W	W						W	W						W	W								✓	
	Sibiya Ziyanda	40	W				W	W						W	W						W	W						W	W								✓	
	Sono Onalerona	41	W				W	W						W	W						W	W						W	W								✓	
	Sundlhane Ntsako	42	W				W	W						W	W						W	W						W	W								✓	
	Thabethe Angel	41	W				W	W						W	W						W	W						W	W								✓	
	Thagane Banele		W				W	W						W	W						W	W						W	W								✓	
	Theko Minenhle	41	W				W	W						W	W						W	W						W	W							✓		
	Vandhla Sky	38	W				W	W						W	W						W	W						W	W								✓	
	Vilakazi Cobolwakhe	39	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: _____