



# DAILY ATTENDANCE CHART

## FOR TEACHERS



Teacher Name : \_\_\_\_\_

Subject : \_\_\_\_\_

Class / Grade : \_\_\_\_\_

Date : \_\_\_\_\_  
(DD / MM / YYYY)

| S. No. | STUDENT DETAILS | ATTENDANCE               |                          |                          |                          | REMARKS |
|--------|-----------------|--------------------------|--------------------------|--------------------------|--------------------------|---------|
|        | Student Name    | PRESENT                  | ABSENT                   | LATE                     | LEAVE                    |         |
| 1      |                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |         |
| 2      |                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |         |
| 3      |                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |         |
| 4      |                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |         |
| 5      |                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |         |
| 6      |                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |         |
| 7      |                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |         |
| 8      |                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |         |
| 9      |                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |         |
| 10     |                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |         |
| 11     |                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |         |
| 12     |                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |         |
| 13     |                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |         |
| 14     |                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |         |
| 15     |                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |         |
| 16     |                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |         |
| 17     |                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |         |
| 18     |                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |         |
| 19     |                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |         |
| 20     |                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |         |
| 21     |                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |         |
| 22     |                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |         |
| 23     |                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |         |
| 24     |                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |         |
| 25     |                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |         |

### ATTENDANCE LEGEND

- P** Present
- A** Absent
- L** Late
- E** Leave / Excused

### DAILY SUMMARY

| Category        | Count |
|-----------------|-------|
| Total Students  |       |
| Present         |       |
| Absent          |       |
| Late            |       |
| Leave / Excused |       |

### NOTES / REMARKS

Teacher Signature : \_\_\_\_\_

Checked By (If Required) : \_\_\_\_\_

★ Every Day Counts, Every Student Matters. ★