

RECORD OF EVENTS - 2021

Please refer to Standard Operating Procedures **SOP0003 – Record of Events Card** at https://ssiconsulting.ca/resources/ for instructions and a completed sample Record of Events Card.

| | mpa Name | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Employee Name | | | First name Last Name | | | | | | | | | | | Employee # | | | | | | | | | | | | | | | | | |
| Job Title | | | | | | | | | | | | | Department | | | | | | | | | | | | | | | | | | |
| | 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 |
| JAN | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| FEB | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| MAR | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| APR | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| MAY | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| JUN | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| JUL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| AUG | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| SEP | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| OCT | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| NOV DEC | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DLC | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Eve | nt C | ode | es | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Abser | | | | | | | J Jury Duty | | | | | | | | | PRL Personal Leave | | | | | | | | | | | | | | |
| AA | Appro | oved A | .bsenc | ence | | | | | L Late | | | | | | | | SD Storm Day | | | | | | | | | | | | | | |
| BL Bereavement Leave | | | | | | | LD Light Duties | | | | | | | | | SP Sick Day - Paid | | | | | | | | | | | | | | | |
| D Discipline | | | | | | | LO Lay-Off | | | | | | | | SU Sick Day - Unpaid | | | | | | | | | | | | | | | | |
| DA Doctor's Appointment | | | | | | | LTD Long Term Disability | | | | | | | | T Training | | | | | | | | | | | | | | | | |
| EL | EL Early Leave ML Maternity Leave | | | | | | | | | | V Vacation | | | | | | | | | | | | | | | | | | | | |
| H Statutory Holiday | | | | | | PL Paternity Leave | | | | | | | WCB Work Related Illness/Injury Weekend | | | | | | | | | | | | | | | | | | |
| F | ~+ F | _ + _ | :1- | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ∟ve | Event Details | | | | | | | | | | Notation | | | | | | | | | | | | | | | | | | | | |
| Date | | | Initials | | | | | Notation Notation | | | | | | | | | | | | | | | | | | | | | | | |
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RECORD OF EVENTS - 2021

| CONSULTING SOLOTIO | | | |
|--------------------|------------|-----------|------------|
| Company Name | | | |
| | | | Feedback # |
| Employee | | | Employee # |
| Name | First name | Last Name | Į. |
| Job Title | | | Department |
| JOD Title | | | Department |
| Date | Initials | | Notation |
| Date | madis | | Notation |
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