2017年暑假结束后未按时返校工作人员情况汇总表

**单位（盖章）： 负责人（签字）：**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **序号** | **姓 名** | **未按时返校原因** | **履行请假手续情况** | **预定返校时间** |
| 1 |  |  |  |  |
| 2 |  |  |  |  |
| 3 |  |  |  |  |
| 4 |  |  |  |  |
| 5 |  |  |  |  |
| 6 |  |  |  |  |
| 7 |  |  |  |  |
| 8 |  |  |  |  |
| 9 |  |  |  |  |
| 10 |  |  |  |  |
| 11 |  |  |  |  |
| 12 |  |  |  |  |
| 13 |  |  |  |  |
| 14 |  |  |  |  |
| 15 |  |  |  |  |
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| 17 |  |  |  |  |
| 18 |  |  |  |  |
| 19 |  |  |  |  |
| 20 |  |  |  |  |

**注：若无未按时回校工作人员，也须单位负责人签字并盖章后返回。**