附件8-1

**村 年 月乡村公益性岗位人员签到表**

**镇 村：（盖章）**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **日 期**  **姓名** | **1** | **2** | **3** | **4** | **5** | **6** | **7** | **8** | **9** | **10** | **11** | **12** | **13** | **14** | **15** | **16** |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **日期**  **姓名** | **17** | **18** | **19** | **20** | **21** | **22** | **23** | **24** | **25** | **26** | **27** | **28** | **29** | **30** | **31** |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **合计工作天数** | |  | | | | | | | | | | | | | | |
| **村委监督人员： 村委负责人：** | | | | | | | | | | | | | | | | |
| **备注：1、实到签名 2、 请假、休息、 旷工请标注** | | | | | | | | | | | | | | | | |