COLCHESTER SCHOOL DISTRICT TIME SHEET - HOURLY PERSONNEL TO BE FILLED OUT BY EMPLOYEE IN INK.

NAME: ______ SIGNATURE: _____

□ IF SUBSTITUTING, NAME/POSITION OF PERSON SUBBING FOR:

□ IF AFTERSCHOOL TUTORING, STUDENT'S INITIALS, SCHOOL:

	DATE	REG	OT	VACA	SICK SELF	SICK FAM	PERS/ DISC'Y	HLDY	OTHER LEAVE	TOTAL HOURS	COMMENTS/SUPERVISOR INITIALS
SUN											
MON											
TUES											
WED											
THURS											
FRI											
SAT											
WEEK 1 TOTAL											
SUN											
MON											
TUES											
WED											
THURS											
FRI											
SAT											
WEEK 2 TOTAL											
2 WEEK TOTAL											
5 minutes = .08 15 minutes = .25 10 minutes = .17 20 minutes = .33					ninutes = .42 ninutes = .50		35 minutes = .58 40 minutes = .67			45 minutes = . 50 minutes = .	

HOURS APPROVED BY:

Building/Program Administrator Only

Date

INSTRUCTIONS:

Supervisor initials required for hours to be paid more than regular schedule due to attendance at workshop, training, etc. or for hours to be paid for in-service days.

Special Rate (if applicable) _____ Charge to Org/Obj Code _____

SP 08-012