DIRECTIONS:

MONTH

- 1. Type your name and employee ID number.
- 2. Type payroll months & year along left side.
- 3. Fill in hours for each day of work, include assignment. Please note any hours you sub for another employee in the end two columns.
- 4. Electronically sign and turn in to your supervisor for signature by payroll cut-off date.

CERTIFICATED TEACHER D CLASSIFIED										SUB SHORT TERM LIMITED ASSIGNMENT					
DATE	SITE			SSIGNMENT			HOURS WORKED			TOTAL TIME HOURS MINUTES		SICK	SUBBED FO	R** SUE	
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EMPLOYEE SIGNATURE:									SUPERVIS						
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110		0		00	4110	1000	-		097		-		SL HRS:		
110	EDT ADD	0	1.	00	4110	DISTO	OT ADD		097		_		PN HRS: SUB HRS:		
SITE / DEPT APPROVAL:						DISTRICT APPROVAL:							TOTAL AMOUNT:		



Employee ID # _

Last Name:

First Name:

YEAR