COLTON-PIERREPONT CENTRAL SCHOOL

TIME SHEET FOR HOURLY EMPLOYEES & SUBSTITUTES

PRINT NAME: _____

For the week ending _____, this is to certify that I have worked as outlined below.

	DATE	Number of Hours	Substituted For
Sunday			
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			
Saturday			

TOTAL HOURS WORKED _____

DATE _____ Signature _____

Supervisor Approval _____

_____

FOR OFFICE USE ONLY

POSITION CODE _____ BUDGET CODE _____

TOTAL HOURS _____X RATE PER HOUR _____ = TOTAL $_____