

NOTE: USE ONE TIMESHEET PER BOARD APPROVED ITEM. EX: SATURDAY SCHOOL ON ONE TIMESHEET, TUTORING ON ANOTHER TIME SHEET Etc.



TUBA CITY UNIFIED SCHOOL DISTRICT NO.15 TIMESHEET

NAME: _____ Position: _____ CODE: _____

BOARD APPROVAL DATE: _____ HOURLY RATE: _____ Grant: _____ Pay Period Paid: _____

DATES WORKED W/IN 2 WEEK PAY PERIOD	TIME IN	TIME OUT	TOTAL HOURS	DESCRIPTION of Activities Performed:
		TOTAL HRS:		

As the employee, I hereby certify that the above hours accurately reflect the time worked and activities worked on during this pay period.

EMPLOYEE'S SIGNATURE _____ DATE: _____ Federal Project Approval _____ DATE _____

PRINCIPAL'S APPROVAL _____ DATE: _____ Supervisors Approval _____ DATE: _____