

PART-TIME TIMESHEET

Employee Name: _____ Pay Period _____ to _____

School _____ Position/Assignment _____

	Date	On	Off	On	Off	Total	Sub for
Monday							
Tuesday							
Wednesday							
Thursday							
Friday							
Saturday							
Sunday							

	Date	On	Off	On	Off	Total	SUB FOR
Monday							
Tuesday							
Wednesday							
Thursday							
Friday							
Saturday							
Sunday							

	Date	On	Off	On	Off	Total	SUB FOR
Monday							
Tuesday							
Wednesday							
Thursday							
Friday							
Saturday							
Sunday							

	Date	On	Off	On	Off	Total	SUB FOR
Monday							
Tuesday							
Wednesday							
Thursday							
Friday							
Saturday							
Sunday							

	Date	On	Off	On	Off	Total	SUB FOR
Monday							
Tuesday							
Wednesday							
Thursday							
Friday							
Saturday							
Sunday							

OFFICE USE ONLY:

Reg. Hours _____

Reg. Hours _____

Reg. Hours _____

Reg. Hours _____

Reg. Hours _____

Reg. Hours _____

MUNIS CODE _____

Total Hours
0

TOTAL HOURS _____

Employee Signature: _____

Total Days

RATE _____

Supervisor Signature: _____

TOTAL _____