

**Certified Staff**

Name \_\_\_\_\_ School \_\_\_\_\_

For office use only: Rate: \_\_\_\_\_ Hours: \_\_\_\_\_

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<u>Day/Date</u>	<u>Hours Worked</u>
_____	_____
_____	_____
_____	_____
_____	_____

Total Hours Worked \_\_\_\_\_

All personal who complete an hourly time sheet are kindly requested to turn the sheet directly in to the BUILDING PRINCIPAL, who will in turn forward it to Central Office.

Signed by PRINCIPAL \_\_\_\_\_

Signed by SUPERINTENDENT \_\_\_\_\_