

**WELD COUNTY SCHOOL DISTRICT RE-5J
CLASSIFIED EMPLOYEE TIME SHEET**

NAME:	ASSIGNMENT:
SOCIAL SECURITY#:	BUILDING:
PAY PERIOD IS FROM THE 12TH TO THE 11TH OF EACH MONTH.	
REMINDER: ALL TIME SHEETS ARE DUE AT THE ADMINISTRATION OFFICE BY THE 12TH OF EACH MONTH. WHEN FILLING OUT TIME SHEETS, LIST HOURS WORKED UNDER TIME IN AND TIME OUT. Time should be rounded to nearest qtr hr.	
*REASON: IF ABSENT OR YOU WORKED OTHER THAN YOUR NORMAL ASSIGNED HOURS, EXPLAIN: (SICK/ANNUAL LEAVE, INSERVICE, VACATION, HOLIDAY, ETC. Do not put in time just hours – leave is in half or full days only)	

PAY PERIOD: MONTH _____, YEAR _____ TO: MONTH _____, YEAR _____

DATE	TIME IN	LUNCH OUT	LUNCH IN	TIME OUT	#HRS WRKD	*REASON (SEE ABOVE)	DATE	TIME IN	LUNCH OUT	LUNCH IN	TIME OUT	#HRS WRKD	*REASON (SEE ABOVE)
12							1						
13							2						
14							3						
15							4						
16							5						
17							6						
18							7						
19							8						
20							9						
21							10						
22							11						
23													
24													
25													
26													
27													
28													
29													
30													
31													

TOTAL HRS PER EMPLOYEE:

TIME SHEET MUST BE SIGNED BEFORE IT CAN BE PROCESSED

EMPLOYEE SIGNATURE	FOR OFFICE USE ONLY: TOTAL HOURS WORKED:		
SUPERVISOR'S SIGNATURE	REGULAR		
PRINCIPAL'S SIGNATURE	OVERTIME		
ACCOUNT CODE:	TOTAL		