

CERTIFICATED TIMESHEET

5 angles

COUNTY OFFICE OF EDUCATION

Temporary Employee/Additional Hours/Substitute

Emple PLEAS	Employee_ SS# XXXX—XXX— Dept Home Phone () PLEASE PRINT (Last Name) (First Name) Required																
Month: Year:								DEPARTMENT USE ONLY									
		WORK SITE	JOB NUMBER	SUBSTIT	TUTE FOR or REASON		FUND	RESOURCE	YR	GOAL	FUNCTION		SCHOOL	MGMT			
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OTAL IOURS/ DAYS		(PLEASE NOT make the payr	E: The pay peri oll deadlines, p	iod is from th lease turn in	ne 19th of one month to your timesheet to your	the 18t departr	n of th	ne next mon on the 18th	th, p of th	ayable th e month.)	e following	10th of the	month. Ir	order to			
	Employee's Signature/Date Manager's Signature/Date Print Manager's Name/Department																
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Temporary Employee/Additional Hours/Substitute

INSTRUCTIONS: This document is to be used by **Certificated Substitutes, Certificated** employees working in a temporary position, and **Regular Certificated** employees who are working overtime or additional hours beyond their normal workday or workyear. Please type or print legibly.

GENERAL INSTRUCTIONS:

Complete top section: Name, last four digits (only) of Social Security Number, Department, and Home Phone Number.

Indicate pay months and year. The pay period is from the 19th of one month to the 18th of the next month, payable the following 10th of the month.

For example, January 19, 2008 to February 18, 2008 will be paid on March 10, 2008.

On each day worked enter the number of hours or day worked. If substituting, indicate either a full day (1) or half day (1/2) worked.

Enter the work site location.

Enter the job number, if you are a substitute you are required to have a job number and this column **must** be completed. If you are not a substitute put a line through the job number column.

Enter the name of the employee you are substituting for or the reason why the work was performed.

All areas must be complete to process time sheet for payment.

Please sign and date the form. Forward to your Department on the **18th** of the month. The Department will complete the gray highlighted account number section, total days/hours, sign and date form, and then forward to the Payroll Department.

The Payroll Department must receive the time sheet no later than the **21st** of the month for processing.