



ALUM ROCK UNION ELEMENTARY SCHOOL DISTRICT

TIMESHEET FOR REGULAR EMPLOYEES, CONTRACTED EMPLOYEES AND SUBSTITUTES

Legal Name: _____ (Last, First) Job Assignment: _____ Employee ID: _____ (6 digits)

Classified Employee Certificated Employee Contracted Employee Substitute

Date: _____ (Month/Year) Job Location: _____ Add'l Time Overtime Comp Time Earned

Name & Title of Employee subbing for: _____

	Date	Start Time	Lunch		End Time	Services Provided	Hrs./Day	Hrs./Day
			In	Out				
Month	25							
	26							
	27							
	28							
	29							
	30							
	31							
Month	01							
	02							
	03							
	04							
	05							
	06							
	07							
	08							
	09							
	10							
	11							
	12							
	13							
	14							
	15							
	16							
	17							
	18							
	19							
	20							
	21							
	22							
	23							
	24							

Stipend: _____ Amount: \$ _____ Total Hrs./Days Worked: _____

FD XXX	RESC XXXX	PY 0	OBJECT XXXX	SB-OB 00	GOAL XXXX	FCTN XXXX	CST-CTR 000000	LOC XXX	PROG XXXX	Accountant Signature
		0		00			000000			
		0		00			000000			
		0		00			000000			

Employee Signature _____ Date _____ Principal/Program Manager Signature _____ Print Name _____ Date _____

Submit **completed** forms to **your School Site/Department** by the 24th of each month for payment on the 10th of the following month, with the exception of November & December. Incomplete forms will be returned and may not be paid on the 10th.
NO FUTURE DAYS WILL BE PAID.