

CERTIFICATED TIME SHEET

Turlock Unified School District

Check One: Substitute Extra Hours In-Lieu Credit

TIME SHEETS DUE THE 15TH OF EACH MONTH - MUST BE COMPLETED IN INK

Name (Please Print) _____

Social Security # _____

Date _____ Site _____

Employee Signature _____

Supervisor Signature _____

DATE	DAY	TIME IN	TIME OUT	TOTAL HRS/DAYS	SUBSTITUTING FOR	REASON	FUNDING (Site Use)	PAYROLL USE ONLY	APPT. I. D.
Total _____									
Pay Rate _____									
Gross _____									
Grand Total _____									