

PERRIS UNION HIGH SCHOOL DISTRICT

CLASSIFIED M&O ON CALL TIMECARD

NAME: _____ POSITION: _____ EMP #: _____

Pay Period Covered: _____ THROUGH: _____ SITE: _____

Work Year (insert ✓): A B C D E F G H I No. of assigned hours per day:

Please use blue or black ink only. NO pencil or red ink and DO NOT USE white out.

No. of assigned hours per day:

Date	Start Time	Lunch		End Time	Total Hours	Absence Code	Funding (Required for Extra Duty/Overtime)
		From	To				

Week On Call Start	Week On Call End	Number Of Day's On Call	Number Of Holidays On Call	Total Number Of Callouts **	Notes

** If one or more callouts is reported in this field you must attach a callout summary timecard to be compensated for that time.

A4 – Union Business

A5 – Negotiations

B - Bereavement (form required)

C – Comp

E – Catastrophic Leave

F - FMLA

H - Holiday

J - Jury Duty (form required)

K - Paid Admin Leave

M - Military

NS - Non Student (hourly only)

P/D - Personal Discretion (form required)

P/N - Personal Necessity (form required)

Q - CFRA

S - Sick

SB - School Business

V - Vacation

W - Workers’ Comp

Y - Unpaid Admin Leave

I HEREBY CERTIFY that I have worked for the Perris Union High School District on the days and hours stated above. I further understand the falsification of District records is grounds for disciplinary action including dismissal.

EMPLOYEE SIGNATURE

ADMINISTRATOR’S APPROVAL