

**CLASSIFIED**  
**EXTRA ASSIGNMENT HOURLY TIMESHEET**

Print Name (Last, First) \_\_\_\_\_ Full SS# or EID# \_\_\_\_\_ School \_\_\_\_\_

REQ # \_\_\_\_\_ Title of Extra Assignment \_\_\_\_\_  
 (REQUIRED) (REQUIRED)

SACS # \_\_\_\_\_

**EACH MONTH MUST BE ON SEPARATE TIMESHEETS!**

**Refer to Payroll Schedule for Timesheet due dates.  
 Hours will be paid on next regular payroll date following the due date.  
 EMPLOYEE IS RESPONSIBLE FOR PROVIDING ORIGINAL TIMESHEET TO PAYROLL**

DATE	STARTING TIME	ENDING TIME	TOTAL HOURS

DATE	STARTING TIME	ENDING TIME	TOTAL HOURS

**FOR DISTRICT PAYROLL USE ONLY**

Total Hours \_\_\_\_\_

Total Hours \_\_\_\_\_ Employee's Signature \_\_\_\_\_ Supervisor's Signature \_\_\_\_\_  
 (Required) (Required)

Project Director's Signature \_\_\_\_\_  
 (Required - For Restricted Funds)