

**OTHER EMPLOYEE – RETIREE**

**Each Month Must be on Separate Timesheets!!**

Print Name (Last, First) \_\_\_\_\_

Full SS#/EID# **(Required)** \_\_\_\_\_

MONTH-YEAR \_\_\_\_\_

Refer to Payroll Schedule for timesheet due date. SACS code are REQUIRED from each site. Please see site administrator for SACS code.

CLASSIFICATION **(Required)** \_\_\_\_\_

**EMPLOYEE IS RESPONSIBLE FOR PROVIDING ORIGINAL TIMESHEET TO THE PAYROLL DEPARTMENT**

Date	Number of Days or Hours	Site/Teacher Substituted For:	SACS Code (REQUIRED)	Approved By:

Total Days/Hours \_\_\_\_\_

EMPLOYEE'S SIGNATURE \_\_\_\_\_ **(REQUIRED)**