

Class Coverage Time Sheet – Substitute Unavailable

Name of Employee _____ ID. #: _____

From _____ /16/ _____ To _____ /15/ _____
 month year month year Site

Signed: _____ Approved: _____

Employee (submit to supervisor no later than 16th) Supervisor (submit to H.R. no later than 17th)

Account Code: 01-0000-0-1110-1000-1105-806-8101 Account Code: _____

Date	Amount of Time (i.e. 8:30 – 10:00; 10:15-12:00) Instructional time only – hrs/min	# of extra students (i.e. 10)	Date	Amount of Time (i.e. 8:30 – 10:00; 10:15-12:00) Instructional time only – hrs/min	# of extra students (i.e. 10)	Date	Amount of Time (i.e. 8:30 – 10:00; 10:15-12:00) Instructional time only – hrs/min	# of extra students (i.e. 10)
16			27			7		
17			28			8		
18			29			9		
19			30			10		
20			31			11		
21			1			12		
22			2			13		
23			3			14		
24			4			15		
25			5					
26			6					

Guidelines

1. Completed time sheet needs to be submitted to supervisor for signature on the 16th of each month.
2. Supervisor signs and sends time sheet to Human Resources no later than the 17th of each month.
3. Human Resources calculates pay and submits to Payroll in time for check to be issued on the 10th of each month.

To be completed by Human Resources

_____ Total Hours X _____ Total # Students @ _____ 1/30 class coverage pay = _____

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Approval _____

TOTAL _____