

**PERRIS UNION HIGH SCHOOL DISTRICT  
CLASSIFIED TIMECARD**

NAME: \_\_\_\_\_ POSITION: \_\_\_\_\_ EMPLOYEE # \_\_\_\_\_

PAY PERIOD COVERED: \_\_\_\_\_ THROUGH \_\_\_\_\_ SITE/DEPARTMENT: \_\_\_\_\_

WORK YEAR: (Please ✓)  A  B  C  D  E  F  G  H  I  J  K No. of assigned hours per day: \_\_\_\_\_

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

Date	Start Time	Lunch		End Time	Total Hours	Absence Code	Funding (Required for Extra Duty / Overtime)
		To	From				
1							
2							
3							
4							
5							
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31							

- |                                 |                                |                        |
|---------------------------------|--------------------------------|------------------------|
| A4 - Union Business             | J - Jury Duty                  | S - Sick               |
| A5 - Negotiations               | K - Paid Admin Leave           | SB - School Business   |
| B - Bereavement (form required) | M - Military                   | V - Vacation           |
| C - Comp Time                   | NS - Non Student (hourly only) | W - Workers' Comp      |
| E - Catastrophic Leave          | P - Personal Leave             | Y - Unpaid Admin Leave |
| F - FMLA                        | Q - CFRA                       |                        |
| H - Holiday                     |                                |                        |

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

EMPLOYEE SIGNATURE \_\_\_\_\_

ADMINISTRATOR SIGNATURE \_\_\_\_\_