23-24 Substitute Kitchen Staff

Employee Name: _____

Week Starting: _____

Hrs:Min

Date	Location	List Employee you are subbing for	Time In	Time Out	Lunch	Time In	Time Out	Time Worked
Sun								:
Mon								:
Tue								:
Wed								:
Thurs								:
Fri								:
Sat								:
							Week 1 Total Hrs:	:

Week Starting: _____

Hrs:Min

Date	Location	List Employee you are subbing for	Time In	Time Out	Lunch	Time In	Time Out	Time Worked
Sun								:
Mon								:
Tue								:
Wed								:
Thurs								:
Fri								:
Sat								:
							Week 2 Hrs:	:

_____ _____

Employee Date

_____

Supervisor Signature