



Somerset Hills School District

 **SUMMER WORK** 

Name: _____

Date: _____

Work Performed: ***MUST add position below**

Rates as per Board Agenda

Position: _____

***PLEASE COMPLETE ONE TIME SHEET FOR EACH TYPE OF WORK COMPLETED**

Work Type: _____ Rate: \$ _____ Total Amount: \$ _____

Date(s)	Time-In	Time-Out	Total Hours	Rate	Total
TOTALS					

Please sign and return this completed form to your Supervisor for signature. Timesheets will be forwarded to the School Business Administrator for processing.

Employee's Signature

Supervisor's Signature