Somerset Hills School District

SUMMER INSTRUCTION

Name: _____ **Date: _____**

Summer Instruction: *MUST circle one
Rates as per Board Agenda
Math Support
History Support
Support Other: _____

BUDGET ACCOUNT # 11-240-100-101-01-00-00-030 (MUST be entered)

***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

_____
GRANT Supervisor's Signature (if applicable)