Each employee is responsible for turning in their own approved timesheet to the payroll department by the due date, in order to receive pay for work performed.

Non-Certified Staff Timesheet

Please make copies on PINK paper

2026-2027

Work Dates: From: _____ **To:** _____

Pay Date: _____

NAME: _____

ADDRESS: _____

JOB TITLE: _____

PHONE #: _____

_____

Account #:

Principals/Administrators: Please indicate account number and rate of pay upon approval.

Please do not write # of minutes worked. Please round to the nearest **quarter** hour when not a full hour/day.
For example: 15 minutes = .25 hours; 30 minutes = .5 hours; 45 minutes = .75 hours

Building	Position (TA,TCH,SEC)	Work Performed: Tutor, Driver's Ed., Crossing Guard ** PLEASE BE SPECIFIC **	DATE	NUMBER OF HOURS

Total Amount To Be Paid:	**Pay Rate:**	**Total Amount Hours Worked:**
Internal Sub Certified Staff: $35	**Gate/Book/Timer: $20/HR**	**Instructional Services: $35/HR**
Crowd Control: $20/HR	**Bus Monitor: $22/HR**	**Non-Instructional Services: $30/HR**
Supervisor Signature:		
Administration Approval Signature:		