

Bolivar-Richburg Central School
Substitute Aide Time Sheet

Name: _____

Position: _____

Payroll Ending Date: _____

Date	Time Frame Worked	Job Performed (Specify who you are in for)	Regular Hours
Ex: 4/12/xx	7:00 - 3:30	Substitute for XXX	8

Employee Signature: _____

Supervisor Signature: _____

(Office Use)

Total Hours	
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