



Somerset Hills School District

 PARA TIMESHEET

Name: _____

Date: _____

MUST CHECK ONE

☐ Classroom Para

☐ Bus Para

☐ After School Activities

SCHOOL: *MUST check one

☐ Bedwell Elementary School

☐ Bernardsville Middle School

☐ Bernards High School

Date(s)	Time-In	Time-Out	Total Hours	Rate	Total
					0
					0
					0
					0
					0
TOTALS:			0		0

Please sign and submit the completed timesheet to your Supervisor for signature within 30 days of completing the work. Once signed, the timesheet will be forwarded to Payroll for processing.

Employee's Signature

Supervisor's Signature