



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     |
| <b>TOTALS:</b> |         |          | 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