



Somerset Hills School District



HOURLY TIMESHEET



Name: _____

Date: _____

SCHOOL: *MUST check one

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☐
☐
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Bedwell Elementary School

Bernardsville Middle School

Bernards High School

Olcott

***PLEASE COMPLETE ONE TIME SHEET FOR EACH TYPE OF WORK COMPLETED**

DESCRIPTION OF WORK: _____

Date(s)	Time-In	Time-Out	Total Hours	Rate	Total
					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