<u>SUBSTITUTE TIMESHEET - CLASSIFIED</u>

ircle one:	Aide	C	ustodian	Lunchroom			Name (print)	
	Secretary		Driver	Field Trip			Employee ID	
							Building	
		Start	t End	30- min	Start	End	Total	
L)ate	Time	Time	break	Time	Time	Hours	Employee you subbed for or Description of Field Trip
Sun								
Mon								
Tues								
Wed								
Thur								
Fri				<u> </u>				
Sat								
						Total		
		Start	End	30- min	Start	End	Total	
L)ate	Time	Time	break	Time	Time	Hours	Employee you subbed for or Description of Field Trip
Sun								
Mon								
Tues								
Wed								
Thur								
Fri								
Sat								
						Total		
*Hours w	orked shou	ıld not ave	<u>T</u> eed schedul			mesheet:		
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		ignature			_	Appro	oved by:	ilding Principal /Supervisor