

# TRANSPORTATION SUBSTITUTE

## CENTRAL VALLEY SCHOOL DISTRICT NO. 356 TIME SHEET

Regular hours only

Over time hours only

(Please use ink)

Hired (new employees only)  
 \_\_\_\_\_ thru \_\_\_\_\_ \$ \_\_\_\_\_  
 Probation  
 \_\_\_\_\_ to \$ \_\_\_\_\_  
 RT Rate

Employee No.		Print Employee Name										Hourly Rate																							
Month	Account No.		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	Reg. Time	Over Time
		R																																	
		T																																	
		O																																	
		T																																	
		O																																	
		T																																	
		O																																	
		T																																	
		O																																	
		T																																	
		O																																	
		T																																	
		O																																	

PLEASE DO NOT WRITE BELOW THIS LINE

❁ MUST COMPLETE INFORMATION ON BACK ❁

CODE:	PERIOD:	HRS:	RATE:	ACCOUNT#:
CODE:	PERIOD:	HRS:	RATE:	ACCOUNT#:
CODE:	PERIOD:	HRS:	RATE:	ACCOUNT#:
CODE:	PERIOD:	HRS:	RATE:	ACCOUNT#:
CODE:	PERIOD:	HRS:	RATE:	ACCOUNT#:
CODE:	PERIOD:	HRS:	RATE:	ACCOUNT#:
CODE:	PERIOD:	HRS:	RATE:	ACCOUNT#:
CODE:	PERIOD:	HRS:	RATE:	ACCOUNT#:

Employee Signature

I hereby certify that the above employee worked the days and hours shown and is entitled to payment.

Department Head or Principal

