

For the MONTH of _____ 20__

DAY	Explanation	Starting Time	Lunch Out	Lunch In	Quitting Time	TOTAL HOURS
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
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21						
22						
23						
24						
25						
26						
27						
28						
29						
30						
31						

ADMINISTRATIVE APPROVAL: Supervisor _____ **TOTAL HOURS:** _____

 Superintendent Date Employee's Signature Last 4 Digits of Soc. Sec. No.