

Employee Name: _____

Date Submitted: _____

Employee ID: _____

Location: _____

Reason for Pay: _____

Type: _____

Beginning Date: _____

Ending Date: _____

DATE	1	2	3	4	5	6	7	8	9	10
TIME IN										
TIME OUT										
# of HOURS										

DATE	11	12	13	14	15	16	17	18	19	20
TIME IN										
TIME OUT										
# of HOURS										

DATE	21	22	23	24	25	26	27	28	29	30	31
TIME IN											
TIME OUT											
# of HOURS											

HOURS WORKED: _____

EMPLOYEE SIGNATURE / DATE: _____

PRINCIPAL SIGNATURE / DATE: _____

NOTE: Please enter in 15 minute increments only and record as quarter hours (i.e. 1 hour 45 minutes = 1.75)