

To be completed by Teacher Aides or Teaching Assistants who require an upgrade due to absence of other BOCES staff.

1. Complete this time sheet every time you fill a position other than to which you were appointed (i.e. an aide works as a teacher for the day).
2. Submit completed time sheets to the classroom teacher for verification. The teacher signs in the designated area. Make a copy of the completed time sheet for your records.
3. Submit original completed time sheet to your SUPERVISOR'S SECRETARY.

Name (Print): _____

Employee #: _____

Address: _____

Telephone #: _____

Substituted For:

Date m / d / yr	Day	School Location	Full Day	Half Day	# Hours	Absent Staff Member	Title	*No Sub Available
	Mon.							
	Tues.							
	Wed.							
	Thurs.							
	Fri.							
		TOTALS						

*** Please check this box when no sub is available.**

I hereby certify that the above information is accurate and complete.

Employee Signature Date

Print Name (Employee)

Absent Staff Member Signature Date

Absent Staff Member (printed)

Principal's Signature Date

Director's Signature Date

Budget Code _____

Approve

Unable to approve*

*Attach comments

Payroll Use Only		
# Days _____	Rate _____	Total Due _____