

Substitute Payroll Sheet

To Be Taken to School Official at the End of Each Day

Name _____

Social Security No. _____

Please Print

(Last Four)

Any dates that do not correspond to this payperiod will not be paid.

Only original forms will be processed for payment



FOR PAYPERIOD OF 10/16/18-10/30/18

PAYPERIOD DEADLINE 10/31/18

*Vacancy (VAC) *General Leave (GL) *School Business (SB) *Bearevement (BL) *Jury Duty (JD)

TO BE COMPLETED BY SCHOOL OFFICIAL							
Dates	Hours Worked	Name and Position of Employee for Whom Substituted	Fund	Job Class*	Location Code	Job Code	School Official Signature Signature
Tuesday, October 16, 2018							
Wednesday, October 17, 2018							
Thursday, October 18, 2018							
Friday, October 19, 2018							
Monday, October 22, 2018							
Tuesday, October 23, 2018							
Wednesday, October 24, 2018							
Thursday, October 25, 2018							
Friday, October 26, 2018							
Monday, October 29, 2018							
Tuesday, October 30, 2018							

Total Hours Worked _____

Substitute will be responsible for submitting this form to Payroll on or before the designated date on the schedule. Time sheets brought in after the due date will **NOT** be paid until the next scheduled semi-monthly pay date.

I certify the above is a correct statement of hours worked

***Time sheet will not be processed without signature**

FOR PAYROLL USE ONLY

Fund	Job Class	Location	Hours	Rate	Total
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