



Substitute Payroll Sheet

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

Name _____
Please Print

Social Security No. _____
(Last Four)

FOR PAYPERIOD OF 10/1/18-10/15/18

Any dates that do not correspond to this payperiod will not be paid.
Only original forms will be processed for payment

PAYPERIOD DEADLINE 10/16/18

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

TO BE COMPLETED BY SCHOOL OFFICIAL

Dates	Hours Worked	Name and Position of Employee for Whom Substituted	Reason for Absence*	Job Code	Fund #	School Site & School Official Signature
Monday, October 1, 2018		Fall Break				
Tuesday, October 2, 2018		Fall Break				
Wednesday, October 3, 2018		Fall Break				
Thursday, October 4, 2018		Fall Break				
Friday, October 5, 2018		Fall Break				
Monday, October 8, 2018						
Tuesday, October 9, 2018						
Wednesday, October 10, 2018						
Thursday, October 11, 2018						
Friday, October 12, 2018						
Monday, October 15, 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**