

Chilton County Schools Time Sheet

EMPLOYEE NAME _____

PAY PERIOD _____

WORK SITE _____

POSITION _____

DATE	START TIME	LUNCH		OTHER		END TIME	TOTAL
		OUT	IN	OUT	IN		
MON							
TUES							
WED							
THUR							
FRI							

TOTAL HOURS THIS WEEK _____

DATE	START TIME	LUNCH		OTHER		END TIME	TOTAL
		OUT	IN	OUT	IN		
MON							
TUES							
WED							
THUR							
FRI							

TOTAL HOURS THIS WEEK _____

DATE	START TIME	LUNCH		OTHER		END TIME	TOTAL
		OUT	IN	OUT	IN		
MON							
TUES							
WED							
THUR							
FRI							

TOTAL HOURS THIS WEEK _____

DATE	START TIME	LUNCH		OTHER		END TIME	TOTAL
		OUT	IN	OUT	IN		
MON							
TUES							
WED							
THUR							
FRI							

TOTAL HOURS THIS WEEK _____

DATE	START TIME	LUNCH		OTHER		END TIME	TOTAL
		OUT	IN	OUT	IN		
MON							
TUES							
WED							
THUR							
FRI							

TOTAL HOURS THIS WEEK _____

I certify that this is an accurate record of the hours worked.

Date: _____ Signature of Employee _____

Checked and approved for payment: _____ Principal/Supervisor