

Certified Over Regular Schedule – Time Card

Crook County School District

Peach

Name: \_\_\_\_\_ ID #: \_\_\_\_\_

Building: \_\_\_\_\_ Period Ending: \_\_\_\_\_

Date	Sub Cert	Hours Over	Account #	Subbing For	Employee Initials
	Days	Regular	Secretary will Assign	Employee' s Name	Approving Daily Time
Total Days			Total Hours:		

For Payroll Use:

CODE	RATE	HOURS

**Instructions:** One timesheet for each substitute per school. Each substitute is responsible for completing the information on a daily basis and initialing the entry to show agreement. This document serves as the basis for pay.

Administrator's Signature: \_\_\_\_\_

Original to Payroll Copy to Building
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