

WISCONSIN HEIGHTS SCHOOL DISTRICT

TIME SHEET

Employee Name: _____

Building: (circle one) BE MZ MS HS Month/year: _____

EMPLOYEE TYPE (must check one)

- Secretary
- Administrative Assistant
- Lunch Service Worker
- Educational Assistant
- Summer School
- Substitutes
- Other: _____

.25 = 15 minutes .50 = 1/2 hour .75 = 3/4 hour 1.00 = 1 hour

Day of the Month	In Time	Out Time	In Time	Out Time	Regular Hours	Comments	Extra Duty In Time	Extra Duty Out Time	Comments	Total Daily Hours
1										-
2										-
3										-
4										-
5										-
6										-
7										-
8										-
9										-
10										-
11										-
12										-
13										-
14										-
15										-
					-	1-15 Total				-

*If you were absent from your building during your normal work day for any reason, you must complete a time off request for the actual time missed.
 By signing this timesheet, I attest that these are the actual hours worked and all additional hours have been pre-approved by my immediate supervisor.
 I acknowledge that any falsification may lead to progressive discipline action.*

Employee Signature Date

Supervisor Signature Date

District Office Signature Date