SUBSTITUTE TIMESHEET

MACON COUNTY BOARD OF EDUCATION

NAME_____

PAY PERIOD FROM_____/_____ THROUGH_____/_____/_____
MONTH DAY MONTH / DAY / YEAR

PAY PERIODS ARE THE 1ST THROUGH THE 15TH, AND THE 16TH TO THE LAST DAY OF THE MONTH. SUBSTITUTE CHECKS WILL BE RUN ONCE MONTHLY WITH THE END OF THE MONTH PAYROLL. ALL SUBS MUST HAVE A CURRENT APPLICATION ON FILE, A BACKGROUND CHECK AND OSHA FOR THE SCHOOL YEAR.

DATE	SCHOOL	SUBSTITUTE FOR: NAME (REG. EMPLOYEE	POSITION	TIME WORKED

TIMESHEETS ARE DUE IN THE CENTRAL OFFICE WITHIN 2 DAYS OF PAYROLL PERIOD ENDING DATE.

_____ _____/_____
SUBSTITUTE SIGNATURE APPROVED BY DATE