

GIDDINGS INDEPENDENT SCHOOL DISTRICT
TIME SHEET

SUPPLEMENTAL WORK ONLY!

	DATE	SIGN IN	LUNCH	SIGN OUT	# HOURS
W E E K 1					

TOTAL WEEK 1 _____

	DATE	SIGN IN	LUNCH	SIGN OUT	# HOURS
W E E K 2					

TOTAL WEEK 2 _____

	DATE	SIGN IN	LUNCH	SIGN OUT	# HOURS
W E E K 3					

TOTAL WEEK 3 _____

	DATE	SIGN IN	LUNCH	SIGN OUT	# HOURS
W E E K 4					

TOTAL WEEK 4 _____

TOTAL MONTHLY HOURS _____

NAME _____

POSITION / CAMPUS _____

SIGNATURE _____

SUPERVISOR'S SIGNATURE _____

PRINCIPAL'S SIGNATURE _____

SUPERINTENDENT'S SIGNATURE _____

FOR OFFICE USE ONLY: _____ @ _____ = \$ _____