

**EXETER UNIFIED SCHOOL DISTRICT  
TRANSPORTATION TIME CARD**

<b>Last Name</b>	<b>First Name</b>	<b>Last 4 numbers of SS#</b>
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Time Period Start: _____ /1/ _____	Time Period End: _____ /31/ _____
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Site _____	Number of Contracted Hours _____	Job Title _____
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Date	Regular Hours	Absence Symbol	Overtime Hours	Extra Trips Explanation /Notes	Overtime Hours	Extra Trips Explanation /Notes	Overtime Hours	Special Trips Explanation /Notes	Payroll Use Only	
1									/	/
2									/	/
3									/	/
4									/	/
5									/	/
6									/	/
7									/	/
8									/	/
9									/	/
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26									/	/
27									/	/
28									/	/
29									/	/
30									/	/
31									/	/

**YOUR SIGNED TIME CARD MUST BE TURNED IN TO YOUR SUPERVISOR NO LATER THAN THE LAST WORKING DAY OF EVERY MONTH UNLESS YOU ARE DIRECTED OTHERWISE.**

**ABSENCE SYMBOLS:**

<b>B-BEREAVEMENT</b> (Relationship of deceased must be noted)	<b>PN-PERSONAL NECESSITY</b> (Immediate Family & Reason must be noted)
<b>C-COMP TIME</b>	<b>S-SICK LEAVE</b> (For Employee Only i.e. Doctor Appointment)
<b>J-JURY DUTY</b>	<b>SB-SCHOOL BUSINESS</b> (Reason must be noted)
<b>PB-PERSONAL BUSINESS</b> (1 Day per year- Does not carry over to the following year)	<b>V-VACATION</b>
	<b>WC-WORKER'S COMPENSATION</b> (Absence related to work related injury)

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EMPLOYEE'S SIGNATURE

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SUPERVISOR'S SIGNATURE