

# La Cañada Unified School District Employee Time Sheet

Employee: \_\_\_\_\_ For the Month of \_\_\_\_\_ Year \_\_\_\_\_

SSN # (Enter last four (4) digits of SSN only) \_\_\_\_\_ Site \_\_\_\_\_

Account #							
	<b>Fund</b>	<b>Resource</b>	<b>Goal</b>	<b>Function</b>	<b>Object</b>	<b>Location</b>	<b>Funding Source</b>

**INSTRUCTIONS:**

1. Show hours worked each day **for only the month indicated above.**
2. If more than one assignment on a day, show hours worked for each assignment.
3. Use additional timesheet(s) if needed for one month.

Date	Hours	* Name of Student if Home Instr. * Name of Person You Subbed for and reason they were absent. * Facilities Group/User Name	* Facilities/Aud. Techs/Overtime <b>MUST</b> include Work Schedule (i.e., 2 p.m. – 6 p.m.). <u>Hours must match total hour.</u> * Describe Duties & Work Schedule	For Facilities & ASB Only	
				FUR# or PO #	Approval

\_\_\_\_\_ TOTAL HOURS

I hereby certify that I have worked for the La Cañada Unified School District for the hours listed above.

**All information MUST be completed in INK and submitted to the payroll office with required signatures two days before payroll cycle closes.**

\_\_\_\_\_  
Employee Signature

FOR PAYROLL USE ONLY		
Schedule	Issue Date	Payroll

\_\_\_\_\_  
Verification (Secretary, Principal, Manager, Etc.)

\_\_\_\_\_  
Supervisor/Administrator Approval

\_\_\_\_\_  
District Office Approval