

Trigg County Schools
MONTHLY TIME SHEET

Please print using blue or black ink only. DO NOT use red.

- Daytime ESS Tutoring
- Afterschool Tutoring
- Professional Development
- Saturday School
- Additional Work Time - explain

Employee Name _____

Employee Number _____

Day of Month	Description of Job Performed	Times Worked	Number of Hours
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
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21			
22			
23			
24			
25			
26			
27			
28			
29			
30			
31			

I hereby certify that the above sheet includes all work performed by me on my official business while working as an unscheduled employee of the Trigg County Board of Education.

To be completed by Accounting Dept.
 Code _____

Employee's Signature _____

Date _____

Approved By _____

Date _____