



Blackhawk School District

Time Sheet

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Please forward a hard copy of this document to your building principal.

Please complete all sections of this form before submission. All time sheets must be submitted to payroll department by 12:00 PM one week prior to the pay date.

All extra duties must be submitted monthly. Payment will only be made for work done in the past 60 days.

Name: _____ Building where employed: _____

Please check one of the following:

Teacher Rate

Substitute Secretary

Substitute Paraprofessional

Other*

Month: _____

Day of Month	Hours Worked	Explanation of Coverage	Day of Month	Hours Worked	Explanation of Coverage
1			16		
2			17		
3			18		
4			19		
5			20		
6			21		
7			22		
8			23		
9			24		
10			25		
11			26		
12			27		
13			28		
14			29		
15			30		
			31		

*If coverage is for homebound instruction, please include the student's name and subject taught.

Total Hours: _____

ASN Number: _____

Employee signature: _____

Date: _____

Building Principal signature: _____

Date: _____

***Building office: Please forward this document to the Superintendent's Secretary at District Office.**