

# Substitute Timesheet

Name: \_\_\_\_\_

Pay Period: \_\_\_\_ / 16 / \_\_\_\_ to \_\_\_\_ / 15 / \_\_\_\_

Site:	DVES	BV
(Circle all that apply)	DO	TRANS

Month: \_\_\_\_\_

Month: \_\_\_\_\_

Day	Pay Type		Person / Position Subbed For
	CERT: Day(s) Worked	CLASS: Hours worked	
16	<input type="checkbox"/> Full Day <input type="checkbox"/> Half Day		
17	<input type="checkbox"/> Full Day <input type="checkbox"/> Half Day		
18	<input type="checkbox"/> Full Day <input type="checkbox"/> Half Day		
19	<input type="checkbox"/> Full Day <input type="checkbox"/> Half Day		
20	<input type="checkbox"/> Full Day <input type="checkbox"/> Half Day		
21	<input type="checkbox"/> Full Day <input type="checkbox"/> Half Day		
22	<input type="checkbox"/> Full Day <input type="checkbox"/> Half Day		
23	<input type="checkbox"/> Full Day <input type="checkbox"/> Half Day		
24	<input type="checkbox"/> Full Day <input type="checkbox"/> Half Day		
25	<input type="checkbox"/> Full Day <input type="checkbox"/> Half Day		
26	<input type="checkbox"/> Full Day <input type="checkbox"/> Half Day		
27	<input type="checkbox"/> Full Day <input type="checkbox"/> Half Day		
28	<input type="checkbox"/> Full Day <input type="checkbox"/> Half Day		
29	<input type="checkbox"/> Full Day <input type="checkbox"/> Half Day		
30	<input type="checkbox"/> Full Day <input type="checkbox"/> Half Day		
31	<input type="checkbox"/> Full Day <input type="checkbox"/> Half Day		
<b>TOTAL</b> <b>a</b>			

Day	Pay Type		Person / Position Subbed For
	CERT: Day(s) Worked	CLASS: Hours worked	
1	<input type="checkbox"/> Full Day <input type="checkbox"/> Half Day		
2	<input type="checkbox"/> Full Day <input type="checkbox"/> Half Day		
3	<input type="checkbox"/> Full Day <input type="checkbox"/> Half Day		
4	<input type="checkbox"/> Full Day <input type="checkbox"/> Half Day		
5	<input type="checkbox"/> Full Day <input type="checkbox"/> Half Day		
6	<input type="checkbox"/> Full Day <input type="checkbox"/> Half Day		
7	<input type="checkbox"/> Full Day <input type="checkbox"/> Half Day		
8	<input type="checkbox"/> Full Day <input type="checkbox"/> Half Day		
9	<input type="checkbox"/> Full Day <input type="checkbox"/> Half Day		
10	<input type="checkbox"/> Full Day <input type="checkbox"/> Half Day		
11	<input type="checkbox"/> Full Day <input type="checkbox"/> Half Day		
12	<input type="checkbox"/> Full Day <input type="checkbox"/> Half Day		
13	<input type="checkbox"/> Full Day <input type="checkbox"/> Half Day		
14	<input type="checkbox"/> Full Day <input type="checkbox"/> Half Day		
15	<input type="checkbox"/> Full Day <input type="checkbox"/> Half Day		
<b>TOTAL</b> <b>b</b>			

\*\* CERT Enter total days worked; CLASS Enter total hour worked  
Attached approved Leave of Absence Request to timesheet

<b>TOTAL (a+b) **</b>	
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Comments/Notes

Employee Signature and Date

I certify that I have performed the duties as reported herein.

Administrator Signature and Date