



WENTZVILLE SCHOOL DISTRICT

Timesheet

NAME

PAYROLL

PERIOD

EMPLOYEE ID NUMBER

BUILDING/
DEPARTMENT

SUBSTITUTE FOR:
(EMPLOYEE NAME)

POSITION

	DATE		IN	OUT	IN	OUT	TOTAL	TOTAL HR.
M		HOURS						Total Hours this week
T								
W								
TH								
F								
SA								
SU								
M		HOURS						Total Hours this week
T								
W								
TH								
F								
SA								
SU								

Total Hours This Timesheet

I CERTIFY THAT THIS SHEET IS COMPLETE AND ACCURATE

I HAVE REVIEWED THIS TIMESHEET AND FIND IT TO BE COMPLETE AND ACCURATE

EMPLOYEE SIGNATURE

DATE

SUPERVISOR'S SIGNATURE

DATE