

**WELD COUNTY SCHOOL DISTRICT RE-5J
SUBSTITUTE EMPLOYEE TIME SHEET**

NAME:	SUBSTITUTING FOR:
SOCIAL SECURITY LAST SIX DIGITS#:	
PAY PERIOD IS FROM THE 12TH TO THE 11TH OF EACH MONTH.	
REMINDER: ALL TIME SHEETS ARE DUE TO THE ADMINISTRATION OFFICE BY THE 12TH OF EACH MONTH – EMAIL TO PAYROLL@WELDRE5J.ORG. WHEN COMPLETING TIME SHEET, LIST WHO YOU ARE SUBBING FOR, WHICH BUILDING AND HOURS WORKED.	

PAY PERIOD: MONTH _____, YEAR _____ TO: MONTH _____, YEAR _____

DATE	BLDG	SUB FOR	TIME IN	TIME OUT	#HRS WRKD	DATE	BLDG	SUB FOR	TIME IN	TIME OUT	#HRS WRKD
12						1					
13						2					
14						3					
15						4					
16						5					
17						6					
18						7					
19						8					
20						9					
21						10					
22						11					
23											
24											
25											
26											
27											
28											
29											
30											
31											
										TOTAL DAYS PER EMPLOYEE:	

TIME SHEET MUST BE SIGNED BEFORE IT CAN BE PROCESSED

EMPLOYEE SIGNATURE	FOR OFFICE USE ONLY: TOTAL HOURS WORKED:	
	REGULAR	
TIME WILL BE VERIFIED WITH ABSENCE MANAGEMENT SUB REPORTS	OVERTIME	
ACCOUNT CODE:	TOTAL	