ANGLOPHONE EAST SCHOOL DISTRICT - TIME SHEET

Permanent Employee () School Location:					your regular place of work			
S.I.N.:				Last Name:	First Name:			
) Secretary / Library Ass't (
TO BE COMPLETED BY EMPLOYEE					TO BE COMPLETED BY SCHOOL/DISTRICT ADMINISTRATOR			
Date (d/m/y)	Time	Time Finished	Total	School	Person Replaced or F (first and last name or indic	Reason	Account (see below)	Authorized Signature (School or District Administrator)
Account Codes: (113-Secretarial o/t, 118-Secretarial Replacements); (414-Custodian o/t, 416-Cust. Replacements, 413-other casual cust.) (Special Projects: Supervisor will allocate number.)					(116-all Library Asst) (<u>Tutors-separate time sheet</u>) (1771-TA replacements) (1715-TA- regular account)	(1750-Hor	Noon Hour Monito ne Hospital Tutori cextra hours)	
Note Timesheet must be completed in full in order to process payment. See reverse for pay schedule and additional information.								
					Signature of Employee			Date
					DISTRICT OFFICE USE			
Total Hours		Rate		Approved By				Date Received:
Entered By				-	Pay Date:			