

## Manual Timecard

Company: **Shoshone School District #312**

Department/Division:

Employee Name:

Pay Period Starting

Pay Period Ending

Date	Number of hours worked	Date	Number of hours worked	Date	Number of hours worked
16		26		5	
17		27		6	
18		28		7	
19		29		8	
20		30		9	
21		31		10	
22		1		11	
23		2		12	
24		3		13	
25		4		14	
				15	

Name of Supervisor:

Comments/Notes:

*Signatures below certify the details listed above are correct.*

Employee Signature

Supervisor Signature

Overtime hours will need to be approved by building Principal.  
Building Principal initials for overtime claimed.

(OT Initials)

Pay periods are from the 16<sup>th</sup> to the 15<sup>th</sup> of monthly.  
Time cards are due the 15<sup>th</sup> of each month. Payday is the 25<sup>th</sup> of each month.

Leave Codes

S – Sick

P – Personal

PR – Professional

V – Vacation

Absence Forms (blue slips) need to be approved by  
building Principal