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| Name:                            |                |           |           |                                    |                      | _           |                            |                    | Emp                | loyee #:      |                        |                |                   |                  | _      |                                   |  |
|----------------------------------|----------------|-----------|-----------|------------------------------------|----------------------|-------------|----------------------------|--------------------|--------------------|---------------|------------------------|----------------|-------------------|------------------|--------|-----------------------------------|--|
| Mailing<br>Address:              |                |           |           |                                    |                      | _           | Appointment: hours per day |                    |                    |               |                        |                |                   |                  |        |                                   |  |
|                                  |                |           |           |                                    | _                    | Position:   |                            |                    |                    |               |                        |                |                   |                  |        |                                   |  |
| Week en                          | ding:          |           |           | 2                                  | 0                    | _           |                            |                    | Loca               | tion:         |                        |                |                   |                  |        |                                   |  |
| Hours Worked                     |                |           |           |                                    | Hours Off Taral BAID |             |                            |                    |                    |               |                        |                |                   |                  |        |                                   |  |
| For Job #s<br>please see over    |                | Regular   |           | Ex                                 | tra O.               |             | Stat.<br>Holiday           | Annual<br>Vacation | Sick<br>Leave      | Paid<br>LOA   | Unpaid<br>LOA          | Total<br>Hours | PAID Hours Office | Explanation &/or |        |                                   |  |
|                                  | b #            |           |           |                                    |                      |             |                            |                    |                    |               |                        |                |                   | Use              | Substi | uted for:                         |  |
| Day<br>Sun                       | Date           |           |           |                                    |                      |             |                            |                    |                    |               |                        |                |                   | Only             |        |                                   |  |
| Mon                              |                |           |           |                                    |                      |             |                            |                    |                    |               |                        |                |                   |                  |        |                                   |  |
| Tues                             |                |           |           |                                    |                      |             |                            |                    |                    |               |                        |                |                   |                  |        |                                   |  |
| Wed                              |                |           |           |                                    |                      |             |                            |                    |                    |               |                        |                |                   |                  |        |                                   |  |
| Thurs                            |                |           |           |                                    |                      |             |                            |                    |                    |               |                        |                |                   |                  |        |                                   |  |
| Fri                              |                |           |           |                                    |                      |             |                            |                    |                    |               |                        |                |                   |                  |        |                                   |  |
| Sat                              |                |           |           |                                    |                      |             |                            |                    |                    |               |                        |                |                   |                  |        |                                   |  |
| Sub 7                            | Fotal:         |           |           |                                    |                      |             |                            |                    |                    |               |                        |                |                   |                  |        |                                   |  |
| Week en                          | ding:          |           |           | 2                                  | 0                    | -           | _                          |                    |                    |               |                        |                |                   |                  |        |                                   |  |
| For Job                          | #s             |           |           | Hours W                            | /orked               |             |                            |                    |                    |               |                        |                | Total             | PAID             |        |                                   |  |
| please se                        |                |           | Regular   |                                    | Extr                 | Extra O.T.  |                            |                    | Annual<br>Vacation | Sick<br>Leave | Paid<br>LOA            | Unpaid<br>LOA  | Hours             | Hours<br>Office  |        | Explanation &/or Substituted for: |  |
| Jo<br>Day                        | Date           |           |           |                                    |                      |             |                            |                    |                    |               |                        |                |                   | Use<br>Only      | Substi | ated for.                         |  |
| Sun                              | Date           |           |           |                                    |                      |             |                            |                    |                    |               |                        |                |                   |                  |        |                                   |  |
| Mon                              |                |           |           |                                    |                      |             |                            |                    |                    |               |                        |                |                   |                  |        |                                   |  |
| Tues                             |                |           |           |                                    |                      |             |                            |                    |                    |               |                        |                |                   |                  |        |                                   |  |
| Wed                              |                |           |           |                                    |                      |             |                            |                    |                    |               |                        |                |                   |                  |        |                                   |  |
| Thurs                            |                |           |           |                                    |                      |             |                            |                    |                    |               |                        |                |                   |                  |        |                                   |  |
| Fri                              |                |           |           |                                    |                      |             |                            |                    |                    |               |                        |                |                   |                  |        |                                   |  |
| Sat                              |                |           |           |                                    |                      |             |                            |                    |                    |               |                        |                |                   |                  |        |                                   |  |
| Sub 7                            |                |           |           |                                    |                      |             |                            |                    |                    |               |                        |                |                   |                  |        |                                   |  |
|                                  | Period<br>als: |           |           |                                    |                      |             |                            |                    |                    |               |                        |                |                   |                  |        |                                   |  |
|                                  |                |           |           | 0                                  | . 1                  | 4 1 1       | 1                          | 10                 | <b>T</b> 7         |               | NT.                    | $\neg$         |                   |                  |        |                                   |  |
| I certify i                      | the inform     | ation pro | ovided on |                                    |                      | urs to be b |                            |                    | Yes ery respect.   |               | No                     |                |                   |                  |        |                                   |  |
| Employee's Signature Date        |                |           |           | Approved by Supervisor (Signature) |                      |             |                            |                    |                    | Date          |                        |                |                   |                  |        |                                   |  |
| FOR PAYROLL DEPARTMENT USE ONLY: |                |           |           |                                    | Iouma T              | Th          | D. C. C.                   |                    |                    |               | Cost Centre Hours Rate |                |                   | Dot-             |        |                                   |  |
| WK Pay Code Cost Centre Hou      |                | iours     | R         | Rate                               | WK                   | Pa          | y Code                     | Cos                | si Centre          | H             | iours                  | Rate           |                   |                  |        |                                   |  |
|                                  |                |           |           |                                    |                      |             |                            |                    |                    |               |                        |                |                   |                  |        |                                   |  |
|                                  |                |           |           |                                    |                      |             |                            |                    |                    |               |                        |                |                   |                  |        |                                   |  |
|                                  |                |           |           |                                    |                      |             |                            |                    |                    |               |                        |                |                   |                  |        |                                   |  |

# **INSTRUCTIONS FOR COMPLETING TIME SHEETS**

Responsibility for completion of the time sheet rests with the individual employee.

All time sheets must be signed where indicated at the bottom of the page, by both the employee and supervisor.

The Payroll Department must receive time sheets at the School Board Office on the Monday following the bi-weekly cutoff date.

### **ABSENCE:**

The reason for any absence from work must be clearly noted on the time sheet and the hours of absence recorded. Employees must secure approval when the absence is foreseeable. Forms are available for this purpose. Under emergency circumstances, contact your supervisor and make arrangements for the approval forms to be completed in your absence. If the approval form has <u>not</u> been completed and submitted to the payroll office, the absence will be treated as personal and a salary deduction will be made.

# **OVERTIME:**

All overtime must have prior approval by the Supervisor. Overtime will be paid unless indicated on the time sheet to bank it.

### **EXTRA HOURS WORKED:**

All extra hours must have an explanation included in the box provided along with the number of the Budget Element to which those hours are to be charged.

### **HOURS WORKED:**

Hours worked are to be shown in decimal form as follows:

| 5 min. =  | .08 | 10 min. = | .17 | 15 min. =  | .25  |
|-----------|-----|-----------|-----|------------|------|
| 20 min. = | .33 | 25 min. = | .42 | 30  min. = | .50  |
| 35 min. = | .58 | 40 min. = | .67 | 45 min. =  | .75  |
| 50 min. = | .83 | 55 min. = | .92 | 60  min. = | 1.00 |

### **JOB NUMBERS:**

All job numbers must be entered on the front of the time sheet in the box allotted at the head of the column.

| School Based Job Numbers |                  |  |    |                  |  |  |  |
|--------------------------|------------------|--|----|------------------|--|--|--|
| 36                       | Car Prog Asst    |  | 24 | TA - Crosswalk   |  |  |  |
| 38                       | Ad Ed Asst       |  | 41 | TA - ESL         |  |  |  |
| 5                        | CA - Elem        |  | 25 | TA - French      |  |  |  |
| 9                        | CA - Sec         |  | 26 | TA - Library     |  |  |  |
| 10                       | CA - Sec in chg  |  | 28 | TA - Science     |  |  |  |
| 27                       | TA - SpEd - Prog |  | 30 | TA - Supervision |  |  |  |
| 29                       | TA - SpEd - SSI  |  | 44 | TA - Tch Kitchen |  |  |  |
| 35                       | TA - SpEd - SSII |  | 37 | CYC Worker       |  |  |  |

| Facilities & Services Job Numbers |                   |  |    |                  |  |  |  |
|-----------------------------------|-------------------|--|----|------------------|--|--|--|
| 2                                 | Trades - Const    |  | 3  | Bus Driver       |  |  |  |
| 15                                | Trades - Elect    |  | 34 | Bus Driver/Grnds |  |  |  |
| 20                                | Trades - Mech     |  | 13 | Custodian        |  |  |  |
| 21                                | Trades - Paint    |  | 43 | Head Cust        |  |  |  |
| 42                                | Labourer          |  | 17 | Groundsperson    |  |  |  |
| 19                                | Mechanic          |  | 23 | Sup School Srv   |  |  |  |
| 11                                | Tech Srv<br>Techn |  | 32 | Tr & Grnd Sup    |  |  |  |

| SBO Job Numbers |                |  |  |  |  |
|-----------------|----------------|--|--|--|--|
| 4               | CA - Ed Dept   |  |  |  |  |
| 6               | CA - Fac & Srv |  |  |  |  |
| 7               | CA - Recept    |  |  |  |  |
| 8               | CA - Sch Srv   |  |  |  |  |
| 31              | TOC Clerk      |  |  |  |  |
| 33              | Acct Clerk     |  |  |  |  |
| 22              | Payroll Clerk  |  |  |  |  |
| 39              | Payl & Ben Ad  |  |  |  |  |
| 46              | TOC/Recept     |  |  |  |  |