Time sheets MUST be submitted by the monthly due date. INCOMPLETE time sheets will be returned.

## **SANTEE SCHOOL DISTRICT**

9625 Cuyamaca Street Santee, CA 92071 (619) 258-2300

<b>District Use Only</b>
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Position #\_

HOURLY EMPLOYEE'S TIME SHEET								
Employ	ree's Name					Employee Identification Number (REQUIRED)		
Position				Rate		Date Time Sheet Submitted (Month & Year)		
Request For: ☐ Regular Pay ☐ Overtime Pay ☐ Substitute Pay ☐ Stipend ☐ Other								
Employee's Use District Use Only								
Date	Absentee or Job Title	Hour	s Min	Position	Rate	Combo Code	Approval Signature	
		Wo	rked					
TOTAL HOURS/MIN WORKED								
I CERTIFY THIS REPORT TO BE TRUE AND CORRECT  EMPLOYEE'S SIGNATURE SUPERVISOR'S SIGNATURE DATE								
Lini 20122 0 GIORATORE			JUPE	33. ENTION S SIGNATURE			DATE	