



Excellence in Staffing.

Employee Name: _____
(Please Print)

Position: _____

District Name: _____

Rate of Pay: _____

GL/Budget Code: _____

Hourly/Daily Time Sheet

Day	Date	Start Time	End Time	Hours
Sunday				
Monday				
Tuesday				
Wednesday				
Thursday				
Friday				
Saturday				
Wk 1 Subtotal				

Day	Date	Start Time	End Time	Hours
Sunday				
Monday				
Tuesday				
Wednesday				
Thursday				
Friday				
Saturday				
Wk 2 Subtotal				

Pay Period		Time Sheet Due	Pay Date
7/3/2022	7/16/2022	7/18/2022	7/22/2022
7/17/2022	7/30/2022	8/1/2022	8/5/2022
7/31/2022	8/13/2022	8/15/2022	8/19/2022
8/14/2022	8/27/2022	8/29/2022	9/2/2022
8/28/2022	9/10/2022	9/12/2022	9/16/2022
9/11/2023	9/24/2022	9/26/2022	9/30/2022
9/25/2022	10/8/2022	10/7/2022	10/14/2022
10/9/2022	10/22/2022	10/24/2022	10/28/2022
10/23/2022	11/5/2022	11/7/2022	11/11/2022
11/6/2022	11/19/2022	11/18/2022	11/25/2022
11/20/2022	12/3/2022	12/5/2022	12/9/2022
12/4/2022	12/17/2022	12/19/2022	12/23/2022
12/18/2022	12/31/2022	12/30/2022	1/6/2023
1/1/2023	1/14/2023	1/13/2023	1/20/2023
1/15/2023	1/28/2023	1/30/2023	2/3/2023
1/29/2023	2/11/2023	2/13/2023	2/17/2023
2/12/2023	2/25/2023	2/27/2023	3/3/2023
2/26/2023	3/11/2023	3/13/2023	3/17/2023
3/12/2023	3/25/2023	3/27/2023	3/31/2023
3/26/2013	4/8/2023	4/10/2023	4/14/2023
4/9/2023	4/22/2023	4/24/2023	4/28/2023
4/23/2023	5/6/2023	5/8/2023	5/12/2023
5/7/2023	5/20/2023	5/22/2023	5/26/2023
5/21/2023	6/3/2023	6/5/2023	6/9/2023
6/4/2023	6/17/2023	6/16/2023	6/23/2023
6/18/2023	7/1/2023	6/30/2023	7/7/2023
7/2/2023	7/15/2023	7/17/2023	7/21/2023

PLEASE EMAIL OR FAX COMPLETED FORM TO:

payroll@edustaff.org or EDUStaff at 877-974-6339

Total Hours/Days: _____

For Pay Period Ending: _____

Employee Signature: _____

Date: _____

District Approval: _____

Date: _____