

POSITIVE DIRECTIONS COLONIAL SCHOOL DISTRICT SUBSTITUTE TIME SHEET

School: _____

Name: _____

Substituting for: _____

| | Day | Date | Time In | *Lunch Time Out | *Lunch Time In | Time Out | Total |
|-----|-----|-----------|---------|--------------------|-------------------|----------|-------|
| EX. | | 8/20/2018 | 7:15 | 11:45 | 12:15 | 2:45 | 7 |

| | | | | | | | |
|-------|--|--|--|--|--|--|--|
| Mon. | | | | | | | |
| Tue. | | | | | | | |
| Wed. | | | | | | | |
| Thur. | | | | | | | |
| Fri. | | | | | | | |

| | | | | | | | |
|-------|--|--|--|--|--|--|--|
| Mon. | | | | | | | |
| Tue. | | | | | | | |
| Wed. | | | | | | | |
| Thur. | | | | | | | |
| Fri. | | | | | | | |

Grand Total

Principal or Other Designated Signature _____

Employee Signature _____