

WINDHAM SCHOOL DISTRICT

Monthly Time Sheet

7.12-1.5-1

NAME: _____

MONTH: _____

UNIT: _____

JOB TITLE: _____

BBF: _____

BBF: _____

TIME WORKED				TIME TAKEN OFF		
DATE	DAY	HOURS	MINUTES	HOURS	MINUTES	REASON
01						
02						
03						
04						
05						
06						
07						
08						
09						
10						
11						
12						
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26						
27						
28						
29						
30						
31						

BCF: _____

BCF: _____

EMPLOYEE SIGNATURE

SUPERVISOR SIGNATURE