GRAND VALLEY LOCAL SCHOOLS TEACHER COVERING FOR ANOTHER TEACHER GVHS/GVMS TIME SHEET

This completed form is to be given to each building secretary to be attached to payroll absentee report. Please use one space for each day. You must write down your starting time and ending time.

Emplovee #:			
GRADE	DATE	PERIOD NUMBER	NAME OF TEACHER COVERING FOR
	TOTAL NUM	BER OF PERIODS COVERED: _	
PRINCIPAL:			BUILDING:
FOR OFFICE USE	ONLY:		
EMPLOYEE #:			SERVICE CREDIT:
PER PERIOD RATE: \$			APPROPRIATION/JOB #:
TOTAL EARNED: \$			PAY PERIOD:

Revised 9.25.19

Employee Name: