HOURLY TIME SHEET

Independent School District #16
8000 Highway 65 NE
Spring Lake Park, MN 55432

Employee Name (Please Print):	Budget Code Number(s):
**Employee #:	
**Building:	
**Sub Location:	

** Employee #, Building, and Sub-Location are found on your paper direct deposit stub or obtained from a building secretary.
Time sheets must be filled out in ink. Copies are NOT accepted. All signatures, dates, and times must be original.

Time should be recorded by the quarter hour. Example: 7:00 a.m. to 7:15 a.m. = .25 hours worked
7:15 a.m. to 8:45 a.m. = 1.5 hours worked
8:45 a.m. to 2:30 p.m. = 5.75 hours worked

DATE	TIME STARTED	A.M. or P.M.	LUNCH BREAK	TIME FINISHED	A.M. or P.M.	NO. OF HOURS WORKED	REASON FOR WORK

Overtime Hours:	Overtime rate is paid when time ***worked*** exceeds 40 hours/week and is pre-approved by your Supervisor.	Total Hours:
OT Rate/Hour:		Rate/Hour:

I declare under penalty of law that the information contained herein is true and correct and that no part of it has been paid.		IMPORTANT: IMPROPERLY FILLED OUT TIME SHEETS MAY RESULT IN A DELAY IN RECEIVING YOUR PAY.
Employee Signature	Date	
Principal or District Signature	Date	