

SCHOOL DISTRICT NO. 79 (COWICHAN VALLEY)
CUPE ITINERANT REGULAR TIME SHEET

Employee #

POSITION TITLE

Employee Name

Pay Period Ending

	Date	Regular Hours	Leave hours	Reason	School	Admin. Approval Signature
Mon						
Tues						
Wed						
Thur						
Fri						
Mon						
Tues						
Wed						
Thur						
Fri						

Employee Signature:

For Office Use only – Do not calculate hours

Stat: _____
 Reg: _____
 Sick: _____
 Vac: _____
 Other: _____

TOTAL:

Please note: This time sheet must be handed in by 4:30 p.m. Friday of end of the pay period.