

MUSTANG PUBLIC SCHOOLS

SUPPORT STAFF

ADDITIONAL PAY TIME SHEET

LEGAL NAME (PRINT LEGIBLY) _____ EMPLOYEE ID# _____ HOME SITE # _____

DAY	DATE	TIME IN	TIME OUT	TIME IN	TIME OUT	TOTAL HOURS	ADDITIONAL PERTINENT INFO
EXAMPLE- Monday	8/4/14	4:00 PM	7:30 PM	9:00 PM	9:30 PM	4.00	WAXING FLOORS

I certify that the above record of services is correct to the best of my knowledge.

EMPLOYEE SIGNATURE _____ DATE _____

FOR OFFICE USE ONLY

TO BE COMPLETED BY SITE ADMINISTRATOR BEFORE SENDING TO PAYROLL

- | | |
|--|--|
| <input type="checkbox"/> CHILD NUTRITION | <input type="checkbox"/> MAINTENANCE |
| <input type="checkbox"/> CUSTODIAN | <input type="checkbox"/> TRANSPORTATION |
| <input type="checkbox"/> ESY | <input type="checkbox"/> BUS ACTIVITY TRIP |
| <input type="checkbox"/> SITE STAFF | <input type="checkbox"/> BUS ACTIVITY TRIP SPECIAL (CHARTER) |
| <input type="checkbox"/> OTHER | |

TOTAL HOURS _____ TO BE PAID AT EMPLOYEES REGULAR HOURLY RATE -- TOTAL \$ _____

TOTAL HOURS _____ TO BE PAID AT EMPLOYEES OVERTIME RATE -- TOTAL \$ _____

TOTAL HOURS _____ @ \$5.00 PER HOUR \$ _____ (BUS ACTIVITY TRIP SPECIAL (CHARTER) ONLY)

TOTAL HOURS _____ @ \$ _____ PER HOUR \$ _____ (SPECIAL EVENTS ONLY)

****HELPFUL INFO FOR PAYROLL:**

SUPERVISOR/MANAGER/DIRECTOR/SITE ADMINISTRATOR SIGNATURE DATE

ADMINISTRATOR SIGNATURE (REQUIRED FOR ALL EXTRA HOURS) DATE

NOTE: Time sheets must be turned in to Payroll before NOON on posted dates. July 2021