

Custodial / Maintenance Time Sheet

Name _____

First Week Ending _____

	Sat/Sun	Monday	Tuesday	Wednesday	Thursday	Friday	Total Hours
Day Rate							
Night Rate							

Second Week Ending _____
(Saturday To Friday)

	Sat/Sun	Monday	Tuesday	Wednesday	Thursday	Friday	Total Hours
Day Rate							
Night Rate							

If submitting for Overtime pay, why was overtime incurred:

- | | | |
|--|---|--|
| <input type="checkbox"/> Sports Coverage | <input type="checkbox"/> Student Function | <input type="checkbox"/> Alarm – Refrigeration |
| <input type="checkbox"/> Snow/Ice Work | <input type="checkbox"/> Outside User Functions | <input type="checkbox"/> Other |
| <input type="checkbox"/> Maintenance | <input type="checkbox"/> Alarm – Security | (Specify) _____ |

Supervisor's Signature

Employee's Signature

Procedures for filling out time sheets:

- 1) Record the number of hours worked per day in the appropriate box. Each day has a day and night rate box. Use the night rate box to record your hours if you are to receive a night differential rate.
- 2) The time sheet should be completely filled out and signed by you. Time sheet forms will be available in Mark Fairbrother's office.
- 3) At the end of a 2 week pay period the time sheet should be submitted to Mark Fairbrother for approval (supervisor's signature).

*Please use blue or lavender stock for copies