

**PLAINVILLE BOARD OF EDUCATION
CLASSIFIED BI-WEEKLY TIME RECORD**

EMPLOYEE NAME: _____ SCHOOL & DEPT: _____

WEEK ENDING: _____

	AM		PM		OTHER		TOTAL HOURS WORKED	COMMENTS
	IN	OUT	IN	OUT	IN	OUT		
WEDNESDAY								
THURSDAY								
FRIDAY								
SATURDAY								
SUNDAY								
MONDAY								
TUESDAY								

WEEKLY TOTAL

WEEK ENDING: _____

	AM		PM		OTHER		TOTAL HOURS WORKED	COMMENTS
	IN	OUT	IN	OUT	IN	OUT		
WEDNESDAY								
THURSDAY								
FRIDAY								
SATURDAY								
SUNDAY								
MONDAY								
TUESDAY								

WEEKLY TOTAL

SIGNED: _____
(EMPLOYEE)

AUTHORIZED BY: _____
(SUPERVISOR)

- KEY:
- | | | | |
|-------------------|------|-------------------|------|
| ABSENCES | | | |
| - WORKERS COMP | - WC | LEAVE WITHOUT PAY | - LW |
| - DEATH IN FAMILY | - DF | PERSONAL TIME | - P |
| - HOLIDAY | - H | SICKNESS | - S |
| - JURY DUTY | - JD | VACATION | - V |

FOR ACCOUNTING USE ONLY: DO NOT WRITE BELOW THIS LINE

_____ TOTAL REGULAR HOURS @ \$ _____ /HR = \$ _____
 _____ TOTAL OVERTIME HOURS @ \$ _____ /HR = \$ _____
 _____ TOTAL OTHER HOURS @ \$ _____ /HR = \$ _____

\$ _____

GROSS PAY