

SCHOOL DISTRICT #45 (WEST VANCOUVER) MONTHLY TIMESHEET - SUPPORT STAFF

NAME: _____

MONTH ENDED: _____

LOCATION: _____

POSITION: _____

	REGULAR WORKING HOURS Enter the Actual Number of Hours Worked Only.								ADDITIONAL OR OVERTIME HOURS Show actual number of hours worked Payroll Dept. will calculate any overtime premium applicable									COMMENTS:	
	SUN	MON	TUES	WED	THURS	FRI	SAT	TOTAL	SUN	MON	TUES	WED	THURS	FRI	SAT	1x	1.5x		2x
WEEK OF																			
WEEK OF																			
WEEK OF																			
WEEK OF																			
WEEK OF																			
Total Regular Hours																			

Indicate any exceptions to normal shift/position:

- A = Absent without pay B = Banked Toil Time Taken C = Chargehand
- H = Statutory Holiday F = Family Illness S = Sick
- PM = Afternoons V = Annual Vacation W = Workers Compensation

Additional Hours Payout? Y N
 Bank? Y N

FOR PAYROLL USE ONLY:

I CERTIFY THAT THE TOTAL HOURS WORKED BY ME ARE CORRECTLY DETAILED ABOVE:

Employee's Signature

APPROVED BY SUPERVISOR:

Supervisor's Signature