

CONNEAUT SCHOOL DISTRICT
Academic Intramural

EMPLOYEE'S NAME _____

DEPT _____

Building	Date	Starting Time	Ending Time	Regular Hours	Overtime Hours	Comments
TOTAL HOURS						
RATE				21.50		
GROSS PAY						

Employee Signature _____

Supervisor's Signature _____

If this is in addition to your regular work week, who authorized these hours? _____

Budget Code: _____

Approved _____

Not Approved _____