GLENN COUNTY OFFICE OF EDUCATION
Student Time Sheet (PRINT ON PURPLE PAPER ONLY)

Name: ___________________________  Month/Year: ___________________________

Date | IN | OUT | IN | OUT | TOTAL OF DAILY HOURS
--- | --- | --- | --- | --- | ---
1    |     |     |     |     |     
2    |     |     |     |     |     
3    |     |     |     |     |     
4    |     |     |     |     |     
5    |     |     |     |     |     
6    |     |     |     |     |     
7    |     |     |     |     |     
8    |     |     |     |     |     
9    |     |     |     |     |     
10   |     |     |     |     |     
11   |     |     |     |     |     
12   |     |     |     |     |     
13   |     |     |     |     |     
14   |     |     |     |     |     
15   |     |     |     |     |     
16   |     |     |     |     |     
17   |     |     |     |     |     
18   |     |     |     |     |     
19   |     |     |     |     |     
20   |     |     |     |     |     
21   |     |     |     |     |     
22   |     |     |     |     |     
23   |     |     |     |     |     
24   |     |     |     |     |     
25   |     |     |     |     |     
26   |     |     |     |     |     
27   |     |     |     |     |     
28   |     |     |     |     |     
29   |     |     |     |     |     
30   |     |     |     |     |     
31   |     |     |     |     |     

NOTES:
*REPORT TIME IN 15 MINUTE INCREMENTS

<table>
<thead>
<tr>
<th>Month</th>
<th>Pay Period</th>
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</thead>
<tbody>
<tr>
<td>July</td>
<td>July 1-31</td>
</tr>
<tr>
<td>August</td>
<td>August 1-31</td>
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<td>Sept</td>
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<td>Oct</td>
<td>October 1-31</td>
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<td>Nov</td>
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<td>Dec</td>
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<td>Jan</td>
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<tr>
<td>May</td>
<td>May 1-31</td>
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<tr>
<td>June</td>
<td>June 1-30</td>
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</tbody>
</table>

__________________________________________  Employee Signature

__________________________________________  Supervisor Signature

__________________________________________  Department Head

__________________________________________  Total Hours  (For Office Use Only)

Revised 6/28/2023