TIME SHEET - EXTRA PAY - INTERNAL FUNDS

Instructions: Please complete and submit to your school or department Timekeeper for processing. This should be attached to the Kronos Timesheet. Name: (please print) Instructional Professional **Employee ID Number:** Educational Support SUB/Misc School/Department: **Payroll Pay Period:** from: to: **FUNDING SOURCE** (to be completed by School or Department) Work Performed-provide brief **Date Worked Start Time Total** Rate of Fund Type Function SubProj(YR) **End Time** Object Facility Project **Program** description Hours Pay (mm/dd/yy) Ε a.m./p.m. Ε a.m./p.m Ε a.m./p.m. Ε a.m./p.m. Ε a.m./p.m. Ε a.m./p.m. Ε a.m./p.m. Ε a.m./p.m Ε a.m./p.m. Ε a.m./p.m Ε a.m./p.m. Ε a.m./p.m. Ε a.m./p.m. Ε a.m./p.m **Grand Total** I certify this time sheet is an accurate record of time worked. **Employee's Signature Principal/Department Head Signature Contact Phone Number** Date Date

Distribution: Original: School- Copy: Attach to Kronos Timesheet