

LIBERTY UNION HIGH SCHOOL DISTRICT HOME HOSPITAL TIME SHEET

employee name (please print)

11th to 10th

(month) (month)

pay period

*(timesheets must be submitted
on the 10th of each month)*

student name

date	day	# of hours taught	prep time
11			
12			
13			
14			
15			
16			
17			
18			
19			
20			
21			
22			
23			
24			
25			
26			
27			
28			
29			
30			
31			

date	day	# of hours taught	prep time
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			

**TOTAL hours
for the pay period**

*Note: A teacher may claim no more than
one (1) hour of prep time per week.*

*By submitting this, you affirm all hours
submitted are direct face to face
instruction time except for one hour of
"prep time" per week.*

Teacher signature

date

Site Administrator signature

date

Assistant Superintendent

date

Administrative/Student Services