

BIGGS UNIFIED SCHOOL DISTRICT TIME CARD

Please Print
 Name _____ Month _____ ID Num: _____

Additional Hours

Position	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		
Extra Work																																	
Overtime																																	
Sub																																	
Extra Work																																	
Overtime																																	
Sub																																	

Absence Report

	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		
Sick																																	
Personal																																	
No Tell																																	
Vacation																																	
Bereavement																																	
Unpaid																																	
Other																																	
Substitute Avail? (check for yes)																																	

Employee Signature _____ Supervisor Signature _____
 Date _____ Date _____

To Be Completed By Supervisor

Hours	Code	Rate

	O/T	EXTRA	SUB	Sports
Aides	2102	2102	2101	
Support	2201	2902	2203	
Other	2902	2402	2901	2903
Clerical	2402	2402	2401	
Certificated	n/a	1103	1101	1102

Reason for Extra Duty/Overtime

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	