

PAYROLL SHEET

This form must be **completed** and **submitted** to the office at the end of the business day that services was provide for payroll purposes.

Name: _____

Title: _____ Date _____

Building: _____

Name of Teacher substituted for: _____

Time Frame worked: from _____ to _____

Reason why (emergency/no sub available/etc): _____

Name of Substitute: _____

Time Arrived: _____

TA's Signature: _____ Date: _____

Approved by: _____ Date: _____
(Administrator)

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To be completed by Business Office:

Whenever a teacher is absent (out of school) and a TA or aide is assigned to cover for that teacher, he/she will be paid one and one-half times his/her hourly rate for each hour or portion thereof spent in the assignment.

Employee's Name \_\_\_\_\_

Hourly Rate: \_\_\_\_\_

Amount Due: \_\_\_\_\_

Payroll Period: \_\_\_\_\_

Payroll Signature: \_\_\_\_\_