

**GILMER COUNTY SCHOOLS
EMPLOYEE'S TIME SHEET**

Employee Name _____
 Employee Position: _____
 School _____ Month _____

Work week based on 40 hours - Midnight Saturday to Saturday. A half-hour break must be taken by all service personnel, within or at the end of the first 5 (five) hours of work. There will be no pay received for the half-hour break.

ID# 922-00-

| Day of week | Day of Month | Morning | | Afternoon | | Office Use Only |
|-------------|--------------|------------|-----------|------------|-----------|----------------------|
| | | Start Time | Quit Time | Start Time | Quit Time | |
| Monday | | | | | | |
| Tuesday | | | | | | |
| Wednesday | | | | | | |
| Thursday | | | | | | |
| Friday | | | | | | |
| Saturday | | | | | | |
| | | | | | | Total Regular Hours |
| | | | | | | Total Overtime Hours |
| | | | | | | Grand Total Hours |

| Day of week | Day of Month | Morning | | Afternoon | | Office Use Only |
|-------------|--------------|------------|-----------|------------|-----------|----------------------|
| | | Start Time | Quit Time | Start Time | Quit Time | |
| Monday | | | | | | |
| Tuesday | | | | | | |
| Wednesday | | | | | | |
| Thursday | | | | | | |
| Friday | | | | | | |
| Saturday | | | | | | |
| | | | | | | Total Regular Hours |
| | | | | | | Total Overtime Hours |
| | | | | | | Grand Total Hours |

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|-------------|--------------|------------|-----------|------------|-----------|----------------------|
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| Monday | | | | | | |
| Tuesday | | | | | | |
| Wednesday | | | | | | |
| Thursday | | | | | | |
| Friday | | | | | | |
| Saturday | | | | | | |
| | | | | | | Total Regular Hours |
| | | | | | | Total Overtime Hours |
| | | | | | | Grand Total Hours |

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| Wednesday | | | | | | |
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| Friday | | | | | | |
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| Monday | | | | | | |
| Tuesday | | | | | | |
| Wednesday | | | | | | |
| Thursday | | | | | | |
| Friday | | | | | | |
| Saturday | | | | | | |
| | | | | | | Total Regular Hours |
| | | | | | | Total Overtime Hours |
| | | | | | | Grand Total Hours |

Total Regular Hours _____ Total Overtime Hours _____

Grand Total Hours for Pay Period _____

Employee Signature _____ Date _____ Supervisor _____