

Certification of Time for Extended Employment

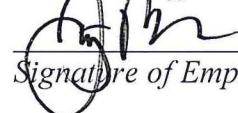
Each central office employee shall complete and submit this form to the immediate supervisor for each pay period at the time designated by Central Office personnel.

EMPLOYEE'S NAME: Jay Brewer POSITION/DEPARTMENT: Superintendent

PAY PERIOD BEGINNING: OCTOBER 19, 2015 PAY PERIOD ENDING: OCTOBER 30, 2015

DATE	On Campus Work Day	Off Campus Work Day	Off Campus Site	LEAVE TYPE/ AMOUNT USED ³
10/19/15	✓			
10/20/15	✓			
10/21/15	✓			
10/22/15	✓			
10/23/15	✓			
10/26/15	✓			
10/27/15	✓			
10/28/15		✓		Frankfurt - Commission's Advisory Council
10/29/15	✓			
10/30/15	✓			
TOTAL DAYS WORKED		10		

I hereby certify that this time sheet is a correct statement of actual days worked during this pay period.


Signature of Employee

11/16/15
Date

Signature of Supervisor

Date

Review/Revised: 4/6/15

³LEAVE KEY

E=emergency P=personal
H=holiday S=sick
J=jury U=unpaid
M=military/disaster V=vacation
NC=Non Contract Day

Certification of Time for Extended Employment

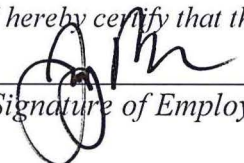
Each central office employee shall complete and submit this form to the immediate supervisor for each pay period at the time designated by Central Office personnel.

EMPLOYEE'S NAME: Jay Brewer POSITION/DEPARTMENT: Superintendent

PAY PERIOD BEGINNING: NOVEMBER 2, 2015 PAY PERIOD ENDING: NOVEMBER 13, 2015

DATE	On Campus Work Day	Off Campus Work Day	Off Campus Site	LEAVE TYPE/ AMOUNT USED ³
11/2/15	✓ ← → ✓			Gateway 1:00
11/3/15	✓			
11/4/15	✓			
11/5/15	✓			
11/6/15	✓			
11/9/15	✓			
11/10/15	✓			
11/11/15	None	✓		Gateway Regional Superintendent Meeting
11/12/15	✓			
11/13/15	✓			
TOTAL DAYS WORKED		10		

I hereby certify that this time sheet is a correct statement of actual days worked during this pay period.


Signature of Employee

11/16/15
Date

Signature of Supervisor

Date

Review/Revised: 4/6/15

³LEAVE KEY

E=emergency P=personal
H=holiday S=sick
J=jury U=unpaid
M=military/disaster V=vacation
NC=Non Contract Day