


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: JANUARY 23, 2017 PAY PERIOD ENDING: FEBRUARY 3, 2017

DATE	On Campus Work Day	Off Campus Work Day	Off Campus Site	LEAVE TYPE/ AMOUNT USED ³
1/23/17	✓			
1/24/17		✓	Frankfort	Superintendent Advisory Com
1/25/17	✓			NKH Advisory Board
1/26/17	✓			
1/27/17	✓			
1/30/17	✓			
1/31/17	✓			
2/1/17	✓			
2/2/17	✓			
2/3/17	✓			
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

2/7/17
 Date

Signature of Supervisor

Date

Review/Revised: 4/21/16

³LEAVE KEY

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

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

PAY PERIOD BEGINNING: JANUARY 9, 2017 PAY PERIOD ENDING: JANUARY 20, 2017

DATE	On Campus Work Day	Off Campus Work Day	Off Campus Site	LEAVE TYPE/ AMOUNT USED ³
1/9/17		✓	Frankfort	Accountability Steering Com.
1/10/17	✓			
1/11/17		✓	NKCES	NKCES Regional Meeting
1/12/17	✓			
1/13/17	✓			Central Bank- Ding Free Club
1/16/17	Holiday			
1/17/17		✓	HHS	Blended Learning Apple Site Visit
1/18/17		✓	Frankfort	Kentucky Department of Health- Cure Life
1/19/17	✓			
1/20/17	✓			
TOTAL DAYS WORKED		9		

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

Jay Brewer
Signature of Employee

2/17/17
Date

Signature of Supervisor

Date

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EMPLOYEE'S NAME: Jay Brewer POSITION/DEPARTMENT: Superintendent
 PAY PERIOD BEGINNING: FEBRUARY 6, 2017 PAY PERIOD ENDING: FEBRUARY 17, 2017

DATE	On Campus Work Day	Off Campus Work Day	Off Campus Site	LEAVE TYPE/ AMOUNT USED ³
2/6/17		✓	Frankfort	Pritchard Com. Early Childhood
2/7/17	✓			
2/8/17		✓	NKCES	NKCES Regional Meeting
2/9/17	✓			
2/10/17	✓			
2/13/17	✓			
2/14/17	✓			
2/15/17		✓	Lexington	* Love KY schools meeting
2/16/17	✓			
2/17/17	✓			
TOTAL DAYS WORKED				

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

[Signature]
 Signature of Employee

2/17/17
 Date

 Signature of Supervisor

 Date

Review/Revised: 4/21/16

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