

**Certification of Time for Extended Employment**

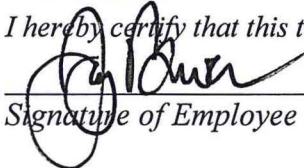
Each central office employee shall complete and submit this form to the immediate supervisor for each pay period at the time designated by Central Office personnel.

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

PAY PERIOD BEGINNING: APRIL 17, 2017 PAY PERIOD ENDING: APRIL 28, 2017

DATE	On Campus Work Day	Off Campus Work Day	Off Campus Site	LEAVE TYPE/ AMOUNT USED <sup>3</sup>
4/17/17		✓		Early Childhood Prof. Learning Comm. Frankfurt
4/18/17	✓			
4/19/17	✓			
4/20/17	✓			
4/21/17		✓		NKU Master's Cohort - Frankfurt
4/24/17	✓			
4/25/17	✓			
4/26/17	✓			
4/27/17	✓			
4/28/17	✓			
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

5/23/17  
Date

\_\_\_\_\_  
Signature of Supervisor

\_\_\_\_\_  
Date

<sup>3</sup>LEAVE 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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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: MAY 1, 2017 PAY PERIOD ENDING: MAY 12, 2017

DATE	On Campus Work Day	Off Campus Work Day	Off Campus Site	LEAVE TYPE/ AMOUNT USED <sup>3</sup>
5/1/17	✓			
5/2/17	✓			
5/3/17		✓		Superintendent Advisory Comm Frankfurt
5/4/17	✓			
5/5/17	✓			
5/8/17	✓			
5/9/17	✓			
5/10/17		✓		NKCES Board Meeting
5/11/17	✓			
5/12/17	✓			
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

5/23/17  
 Date

Signature of Supervisor

Date

Review/Revised: 4/21/16

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