## Certification of Time for Extended Employment

Centra	Each
ral Office i	central
Central Office personnel.	Each central office employee shall complete and submit this form to the immediate supervisor for each pa
	complete and
	submit
	this for
	m to t
	nit this form to the immediate s
	diate sup
	ervisor
	for each
	pay p
	eriod at
	nd at the time design
	e designated by

Sential Ottion by	personner.			
MPLOYEE'S NAME:		Jay Brewer	POSITION/DEPARTMENT:	IT: Supeciateadent
PAY PERIOD BE	PAY PERIOD BEGINNING: MAY 1, 2019		PAY PERIOD ENDING: MAY 17, 2019	
DATE	On Campus Work Day	Off Campus Work Day	Off Campus Site	LEAVE TYPE/ AMOUNT USED³
5/1/19	1			
5/2/19	1			
5/3/19	1			
5/6/19	1			
5/7/19	1			
5/8/19	5	1		@ MKCES Bound Mention
5/9/19	1			
5/10/19	7			
5/13/19	1			
5/14/19	5			
5/15/19	5			
5/16/19	(			
5/17/19	5			
TOTAL D	TOTAL DAYS WORKED 13			

The Owe	I hereby certify that this time sheet is a correct statement of actual days worked during this pay period.	
E=emergency	<sup>3</sup> LEAVE KE	
P	KEY	

Review/Revised: 3/21/18

Signature of Employee

Date

Signature of Supervisor

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

Date

## Certification of Time for Extended Employment

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

Signature of Employee	I hereby certify that this time sheet is a correct statement of actual days worked during this pay period.	TOTAL DAYS WORKED		4/30/19	4/29/19	4/26/19	4/25/19	4/24/19	4/23/19	4/22/19	4/19/19	4/18/19	4/17/19	4/16/19	4/15/19	DATE On Campus Work Day	PAY PERIOD BEGINNING: APRIL 15, 2019		Central Office personnel.
Date	t is a correct statement c	9->														k Off Campus Work Day		JAY Brewer	
Signature of Supervisor	f actual days worked durin															Off Campus Site	PAY PERIOD ENDING:APRI	POSITION/DEPARTMENT:	
isor Date	g this pay period.															LEAVE TYPE/	APRIL 30, 2019	NT: Superintendent	
H=holiday J=jury	LEAVE KI															LEAVE TYPE/ AMOUNT USED³			
S=sick U=unpaid	<u>∃Y</u> P=personal																		

Review/Revised: 3/21/18

M=military/disaster V=vacation NC=Non Contract Day