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.

NC=Non Contract Day					d: 3/21/18	eview/Revised: 3/21/18
H=honday S=sick J=jury U=unpaid M=military/disaster V=vacation	Date	pervisor	Signature of Su	Date 1	mployee	ignature of E
LEAVE KE	period.	during this pay p	hereby eartify that this time sheet is a correct statement of actual days worked during this pay period. $ \frac{(0/36)19}{(0/36)19} $	s a correct statement c	that this time sheet is	hereby gartify
					TOTAL DAYS WORKED 7	TOTAL
	The state of the s					
Astras 7	Leddythia	へがくもろ		7		6/14/19
A-tent	NKCES Leadership	ンス		(MART	6/13/19
					(6/12/19
					1	6/11/19
					7	6/10/19
					7	6/7/19
					7	6/6/19
					1	6/5/19
					7	6/4/19
					7	6/3/19
DUNT USED³	LEAVE TYPE/ AMOUNT USED ³		Off Campus Site	Off Campus Work Day	On Campus Work Day	DATE
	1	NE 14, 2019	PAY PERIOD ENDING:JUNE 14, 2019		PAY PERIOD BEGINNING: JUNE 3, 2019	AY PERIOD B
	JUDGREN TENDENT		POSITION/DEPARTMENT:	NEWER	AME: JAY BREWER	MPLOYEE'S NAME:
	,	2				entral Office personnel