Certification of Time for Extended Employment

Employee's I	NAME: Jay 6	renel	_ POSITION/DEPARTM	ENT: Superin	tendent	-	
PAY PERIOD E	BEGINNING: APRIL 1	1, 2022 PAY PER	RIOD ENDING: APRIL 2	9, 2022			
DATE	On Campus Work Day	Off Campus Work Day	Off Campus Site	LEAVE TYPE/ AMOUNT USED ³			
4/11/22	<u></u>						
4/12/22	✓						
4/13/22	~						
4/14/22							
4/15/22							
4/18/22	~						
4/19/22	200						
4/20/22				NKCES Sag	er:atendent		
4/21/22				WKU Cons	e7		
4/22/22				WKn Cor	roct		
4/25/22							
4/26/22	~						
4/27/22	~						
4/28/22					ž		
4/29/22							
TOTAL	DAYS WORKED	5					
hereby certify Signature of E	2	a correct statement of 5/18/22 Date (actual days worked duri		Date	H=holiday S=	personal sick sunpaid vacation

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Central Office EMPLOYEE'S	NAME: Jay	Brewer_	POSITION/DEPARTME	NT: Sugerntendent		
PAY PERIOD I	BEGINNING: MAY 2, 2	2022 PAY PERI	OD ENDING: MAY 13, 202	2		
DATE	On Campus Work Day	Off Campus Work Day	Off Campus Site	LEAVE TYPE/ AMOUNT USED ³		
5/2/22	1					
5/3/22	Brown and the second					
5/4/22	V					
5/5/22	~					
5/6/22						
5/9/22	~	i i		* * * * * * * * * * * * * * * * * * * *		
5/10/22			ř			
5/11/22	-					
5/12/22	· ·					
5/13/22	NC					
TOTAL DA	YS WORKED 9					
I hereby certify Signature of E	Employee	a correct statement of S/18/22 Date	f actual days worked durin Signature of Superv		3LEAVE KEY E=emergency P=personal H=holiday S=sick J=jury U=unpaid M=military/disaster V=vacation NC=Non Contract Day	