

PERSONNEL

03.121 AP.23

**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: MAY 16, 2022 PAY PERIOD ENDING: MAY 27, 2022

DATE	On Campus Work Day	Off Campus Work Day	Off Campus Site	LEAVE TYPE/ AMOUNT USED <sup>3</sup>
5/16/22	✓			
5/17/22	✓			
5/18/22	✓			
5/19/22	✓			
5/20/22	✓			
5/23/22	✓			
5/24/22	✓			
5/25/22	✓			
5/26/22	✓			
5/27/22	✓			
TOTAL DAYS WORKED		10		

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

[Signature]  
Signature of Employee

6/21/22  
Date

[Signature]  
Signature of Supervisor

          
Date

Review/Revised: 3/21/18

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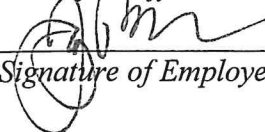
Each central office employee shall complete and submit this form to the immediate supervisor for each pay period at the time designated by Central Office personnel.

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

PAY PERIOD BEGINNING: MAY 30, 2022 PAY PERIOD ENDING: JUNE 10, 2022

DATE	On Campus Work Day	Off Campus Work ay	Off Campus Site	LEAVE TYPE/ AMOUNT USED <sup>3</sup>
5/30/22	✓			
5/31/22	✓			
6/1/22	✓			
6/2/22	✓			
6/3/22	<del>work</del> NC			
6/6/22	✓			
6/7/22	✓			
6/8/22	✓			
6/9/22	<del>work</del>	✓		NKCES Leadership Retreat
6/10/22	<del>work</del>	✓ 1/2		NKCES Leadership Retreat
TOTAL DAYS WORKED		8 1/2		

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

  
Signature of Employee

6/21/22  
Date

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

\_\_\_\_\_  
Date

Review/Revised: 3/21/18

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