## <u>Certification of Time for Extended Employment</u>

Each central off Central Office p		omplete and submit th	is form to the immediate			
EMPLOYEE'S N	AME: Jan G	ener	Position/Departm	ENT: Superior	tendent	
PAY PERIOD B	EGINNING: OCTOB	BER 31, 2022 PA	y Period Ending <u>: NOV</u>	VEMBER 11, 2022	_	
DATE	On Campus Work Day	Off Campus Work Day	Off Campus Site	LEAVE TYPE/ AMOUNT USED³		
10/31/22	~	~		United Way	Breed N	leetin
11/1/22				7		3
11/2/22		~		KASA- FA	or heada	รหา
11/3/22						
11/4/22						
11/7/22						
11/8/22	~					
11/9/22				NKCES Spec	intendent 1	Reeting / NKN (Done)
11/10/22				V		
11/11/22					•	
						1000
TOTAL	DAYS WORKED T	7				
I hereby certify to Signature of En	mployee	a correct statement o	f actual days worked dur Signature of Super		Date	3LEAVE KEY E=emergency P=personal H=holiday S=sick J=jury U=unpaid M=military/disaster V=vacation NC=Non Contract Day

## <u>Certification of Time for Extended Employment</u>

		omplete and submit thi	s form to the immediate	supervisor for each pay	y period at the	time designated by	
Central Office p	AME: 5	Center	Position/Departm	T. 1000	2-10-2		
					Jenaen		
PAY PERIOD BI	eginning: <u>OCTOB</u>	ER 10, 2022 PA	Y PERIOD ENDING: OC	CTOBER 28, 2022			
DATE	On Campus Work Day	Off Campus Work Day	Off Campus Site	LEA	LEAVE TYPE/ AMOUNT USED³		
10/10/22							
10/11/22							
10/12/22							
10/13/22	~						
10/14/22						Diagnosis de la constante de l	
10/17/22	Sick Day						
10/18/22	~ /						
10/19/22				NKCES			
10/20/22							
10/21/22						7.0	
10/24/22							
10/25/22				NKW Dong Pro	dertin S	peake/	
10/26/22							
10/27/22							
10/28/22							
TOTAL DAYS W	ORKED 15				,		
ta Dur		11/15/22	f actual days worked dur			<sup>3</sup> LEAVE KEY E=emergency P=persona H=holiday S=sick	
Signature of Employee		Date *	Signature of Supervisor Date			J=jury U=unpaid M=military/disaster V=vacation NC=Non Contract Day	
Review/Revise	ed: 3/21/18					NC-Non Contract Day	