

# SCHOOL DISTRICT No. 85 (Vancouver Island North)

## REGULAR CUPE TIMESHEET

School/Worksite: \_\_\_\_\_ Employee Number: \_\_\_\_\_

Pay Period Ending Date: \_\_\_\_\_ Name: \_\_\_\_\_

Position: \_\_\_\_\_

PP	HOURS WORKED							HOURS ABSENT			MUST include name of replacement worker in this column	
	REGULAR HOURS			OVERTIME HOURS			OTHER HOURS (PRO D)	LIF	SICK LEAVE	VAC'N LEAVE		OTHER HOURS
DATE	IN	OUT	TOTAL	IN	OUT	TOTAL						
S												
M												
T												
W												
T												
F												
S												
S												
M												
T												
W												
T												
F												
S												
<b>TOTAL</b>												

500

501

430

440

450

### ADDITIONAL DETAILS

DATE	

### This Section for Payroll Use Only PP #

G.L. Codes	Pay Type	Hours	Rate

\_\_\_\_\_  
Supervisor's Approval

\_\_\_\_\_  
Employee's Signature

please TOTAL your hours