NUTRITION SERVICES SUBSTITUTE TIMESHEET 2023-2024

NAME_____
ID # _____
ADDRESS_____
CITY, STATE, ZIP_____

POSITION	CODE	RATE
NUTRITION SERVICES ASSISTANT	1	$15.73

DATE	BUILDING	ABSENTEE NAME	TIME IN	TIME OUT	TIME IN	TIME OUT	TOTAL # HOURS	RATE OF PAY	CODE	AUTHORIZED SIGNATURE

Substitute Signature_____

TIMESHEETS ARE DUE BY THE 3RD OF THE MONTH. LATE TIMESHEETS WILL BE HELD UNTIL THE FOLLOWING MONTH.

REVISED 6-23-2023