

**TWIN RIVERS CAREER & TECHNICAL EDUCATION AREA
RECORD OF HOURS WORKED**

*Non-Certified Personnel
Bi-Weekly Payroll Periods*

Employee's Name _____

Work Period Beginning _____ to and Including _____

Month	Day	Year	Day of the Week	Number of Hours Worked	Job Classification
			Monday		
			Tuesday		
			Wednesday		
			Thursday		
			Friday		
			Saturday		
			Sunday		
			Monday		
			Tuesday		
			Wednesday		
			Thursday		
			Friday		
			Saturday		
			Sunday		
				Total Hours Worked	

Approved by

Employee Signature