CARTER COUNTY SCHOOLS

TIMESHEET – EXPULSION

EMPLOYEE:				(PRINT NAME)		
SCHOOL:						
PAY PERIOD BEGINNING DATE:		Eſ	NDING DATE:			
DATE	STUDENT NAME	TIME BEGINNI	NG	TIME ENDING	HOURS	
APPROVED:			DATE: _			

PLEASE READ - IMPORTANT

TIME SHEETS <u>MUST</u> BE TURNED IN TO YOUR SCHOOL SECRETARY ON THE 15TH AND LAST DAY OF EACH CALENDAR MONTH. TIME SHEETS TURNED IN FOR PAST DUE PAY PERIODS <u>WILL NOT</u> BE ACCEPTED. FAXED TIME SHEETS WILL NOT BE ACCEPTED.