

Jefferson Parish Schools Title I Sign In Sheet

EXTENDED HOURS / TUTORING / FIELD EXPERIENCE

_____ Teacher (5-1510-132) _____ Clerical (5-2410-134) _____ Temporary Employee (5-1510-129) _____ Educational Interventionist/Counselor/Social Worker (5-2122-133)	_____ Paraprofessional (5-1510-135) _____ Bus Driver (5-2721-136) _____ Speech Therapist (5-2152-133) _____ Custodian (5-2620-136)
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School/Department _____ School Code _____ Date/Week of _____

Date	Name	Signature	Position	Emp. #	Time In	Time Out	Amount Per Hour	Total Hours	Total Amount
									\$
									\$
									\$
									\$
									\$
									\$
									\$
									\$
									\$
TOTAL									\$

Principal's Signature _____ Date _____

Key Code _____ Object Code _____ General Ledger/EIC Code _____

I hereby certify that by signing this time sheet, I spent 100% of my time on the above-referenced program. This report is an after-the-fact determination of the activity and actual effort expended for the period indicated, and I have full knowledge of 100% of these activities.