



FNMI Time Sheet

Due at the CEC by the 18th of the month

Employee # : _____

Time Period:

Full Legal Name: _____

2019/___/16 to 2019/___/15

School: _____

Pgm:	Regular	Extra	Reason for Overtime
Date	Hours	Hours	and/or Comments
16			
17			
18			
19			
20			
21			
22			
23			
24			
25			
26			
27			
28			
29			
30			
31			
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
Total	0.00	0.00	<input type="checkbox"/> Please Bank Extra Time <input type="checkbox"/> Please Pay out Extra Time

Employee's Signature

Authorization

*** Please use comment line to describe program extra hours