

KEARNY SCHOOL DISTRICT TIME SHEET

NAME _____

POSITION: _____ **MONTH:** _____

Day	1st Shift		2nd Shift		3rd Shift		Total Hrs
	From	To	From	To	From	To	
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							
14							
15							
16							
17							
18							
19							
20							
21							
22							
23							
24							
25							
26							
27							
28							
29							
30							
31							

TOTAL HOURS

**EMPLOYEE
SIGNATURE**

**SUPV
SIGNATURE**
