

# Damon ISD Auxiliary Sign In / Out Sheet

Employee # \_\_\_\_\_

Week Ending \_\_\_\_\_ Date \_\_\_\_\_

Damon Elementary  
Campus

Employee Name: \_\_\_\_\_  
(Print / Type)

Job Bus Driver

Turn in time sheet weekly

									Payroll Use Only	
Day	Date	Time In	Lunch Time In	Lunch Time Out	End of Day Time Out	Total Hours Worked	Total Hours Leave	Comments / Reason for Extra Hours	Reg Comp Hrs	OT Comp Hours
Sun										
Mon										
Tue										
Wed										
Thur										
Fri										
Sat										

I certify that the above time record is a true and accurate record of attendance and amounts due.

NOTE: Absence From Duty Form must be attached for any absence. Prior Administrator approval required for extra hours!

Principal/Administrator Signature \_\_\_\_\_

Employee's Signature \_\_\_\_\_

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**Payroll Use Only**

**1. Posted Comp Time Earned RSCCC**

Previous Earned Balance \_\_\_\_\_

Comp Earned this Period \_\_\_\_\_

New Earned Balance \_\_\_\_\_

Comp Used this period \_\_\_\_\_

**2. Verified**

Leave Status Report \_\_\_\_\_