



BIRDVILLE INDEPENDENT SCHOOL DISTRICT
TIME RECORD
(Teacher stipend for covering unfilled classes)

NAME: _____

EMPLOYEE ID#: _____

(PeopleSoft ID#)

JOB PERFORMED: Covering Unfilled Classes CAMPUS: _____

| <u>Month</u> | <u>Day</u> | <u>Class Period(s)</u> | <u>Job # of Absent Employee</u> | <u>Name of Absent Employee</u> |
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| | 31 | | | |

Total class periods worked: _____ x \$15.00 per class period = \$ _____

BUDGET CODE: _____ **170.11.6118.ED** **.511000** _____

Payroll deductions will be applicable and payment will be reflected in the regular monthly check.
(Please return completed form to the Payroll Office and send one copy to Suzy Compton, Personnel Services, by the monthly cut-off date.)

I certify the above to be a true and correct record of the time worked in this time period.

Employee's Signature: _____

Administrator's Signature: _____

Date: _____