

# Hobart School District I001

## Weekly Timesheet

Time Card: To be completed in employee's handwriting

Name: \_\_\_\_\_

Supervisor: \_\_\_\_\_

All work weeks are comprised of the seven consecutive 24-hour periods beginning and ending at 12:00:01 a.m. Sunday morning.

Day	Date	In	Lunch Out	Lunch In	Break Out	Break In	Out	Hours Worke			
<b>Monday</b>											
<b>Tuesday</b>											
<b>Wednesday</b>											
<b>Thursday</b>											
<b>Friday</b>											
<b>Saturday</b>											
<b>Sunday</b>											
								<b>Hours Worked</b>		<b>Overtime Hours Worked</b>	

Employee Signature: \_\_\_\_\_ Date: \_\_\_\_\_

I verify the the above information is an accurate reflection of all actual hours I worked during the specified work-week

Supervisor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

I verify the the above information is an accurate reflection of all actual hours worked by the above employee during the specified work-week