



ADELANTO ELEMENTARY SCHOOL DISTRICT CERTIFICATED SUBSTITUTE'S TIME REPORT

Full Name: _____ Last 4 digits of SSN: _____ Cycle:

| Site | Date | Substituted For: | Reason/Description | Job Number | Funding Source | Full day (1) or Half Day (1/2) | # of hours (For Sat. school only) | Approved By |
|----------------|------|------------------|--------------------|------------|----------------|---|---|-------------|
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| TOTALS: | | | | | | | | |

EMPLOYEE'S SIGNATURE: _____ DATE: _____

| Cycle | Month | Pay period | Date Due to District Office | Pay Date |
|--------------|-------------------|-------------------|------------------------------------|-----------------|
| 7 | July | 7/1 - 7/20 | 7/21/2021 | 8/9/2021 |
| 8 | July/August | 7/21 - 8/19 | 8/20/2021 | 9/9/2021 |
| 9 | August/September | 8/20 - 9/20 | 9/21/2021 | 10/11/2021 |
| 10 | September/October | 9/21 - 10/19 | 10/20/2021 | 11/9/2021 |
| 11 | October/November | 10/20 - 11/16 | 11/17/2021 | 12/9/2021 |
| 12 | November/December | 11/17 - 12/14 | 12/15/2021 | 1/10/2022 |
| 01 | December/January | 12/15 - 1/19 | 1/25/2022 | 2/9/2022 |
| 02 | January/February | 1/20 - 2/16 | 2/17/2022 | 3/9/2022 |
| 03 | February/March | 2/17 - 3/18 | 3/21/2022 | 4/11/2022 |
| 04 | March/April | 3/19 - 4/19 | 4/20/2022 | 5/9/2022 |
| 05 | April/May | 4/20 - 5/19 | 5/20/2022 | 6/9/2022 |
| 06 | May/June | 5/20 - 6/20 | 6/21/2022 | 7/11/2022 |
| 06-S | July 15th Pay | 6/21 - 6/30 | 7/1/2022 | 7/15/2022 |

By signing this form, I agree that all information is true and correct to the best of my knowledge. I also acknowledge that if my time report is not turned in by the due date, I will not receive payment until the next pay period.

Half day is defined as 3 hours and 29 minutes or less and full day is 3 hours and 30 minutes or more.

The amount you will be paid is determined by the number of hours worked, as recorded on the sub system.