Extra Time Tracking Sheet

Month / Year:		Normal Hours per Day:	
mployee Na	me:		
ob Title:			
Last four SSN #:		School Site (if applic)	
DATE (MM/DD/YY)	EXTRA HOURS WORKED	REASON	TOTAL
01/27/14	5:00 pm - 6:15pm	After hours meeting (EXAMPLE)	1.25
		GRAND TOTAL	0
Employee Signature:		Date:	
Supervisor Signature:		Date:	

- All extra time requires pre-approval

- Signed Request for Overtime/Extra Time form should accompany this form
- One sheet per month
- Signed form is due to Payroll department by the 5th of the following month
- Payment will be included on your paycheck the following month
- Forms submitted after the deadline will delay payment another month