GJUESD CLASSIFIED EMPLOYEE TIME RECORD PAYROLL PERIOD: FEBRUARY 21, 2024 THROUGH MARCH 20, 2024

NAME: EMPLOYEE ID: 1 - Pers IM/Med Appl 5 - Worker's Comp 9 - School of POSITION: 2 - Pers. Necesity 6 - Non-Work Day 14 - Jury Do June 10 - Jury Do June 14 - Jury Do June 15 Min = 0.08	
CAFTERIA:	School Bus.
CACEP NSLP	- Jury Duty
SMIN = 0.08	
Personal reason leave may not be used before or after a holiday or recess period.	
* Personal reason leave may not be used before or after a holiday or recess period.	MIN = 0.92
* Absence over 5 days need to be reported to Human Resource Department. * If you work more than one job classification, work extra or overtime, please record that time on a separate timesheet. DATE	
# If you work work that one job classification, work extra or overtime, please record that time on a separate timesheet. Note	
HOURS HOURS ABSENT CODE JOB ID # REASONS:	L
DATE WORKED ABSENT CODE JOB ID # REASONS: 2/21/24 Image: Control of the property of the prope	neet.
2/21/24	
22	
23	
24 SATURDAY 25 SUNDAY 26 26 27 27 28 29 29 20 20 20 20 20 20 20 20 20 20 20 20 20	
25 SUNDAY 26 27 28 28 29 20 20 20 20 20 20 20 20 20 20 20 20 20	
26	
27	
29	
3/1/24	
2 SATURDAY 9 3 SUNDAY 9 6 6 6 7 7 7 8 9 SATURDAY 10 SUNDAY 9 11 11 11 12 12 14 13 14 15 16 SATURDAY 17 17 SUNDAY 17 18 19 19 20 10 10	
3 SUNDAY PROFESSIONAL DEVELOPMENT DAY 5	
4 PROFESSIONAL DEVELOPMENT DAY 5 S 6 S 7 S 9 SATURDAY 10 SUNDAY 11 SUNDAY 12 SUNDAY 13 SUNDAY 14 SUNDAY 15 SUNDAY 16 SATURDAY 17 SUNDAY 18 SUNDAY 19 SUNDAY 19 SUNDAY	
5 6 6 7 8 7 8 9 SATURDAY	
6	
7 8 9 SATURDAY 10 SUNDAY 11 12 13 14 15 15 16 SATURDAY 17 SUNDAY 18 19 20 10	
8 9 SATURDAY 10 10 SUNDAY 11 11 12 13 13 14 14 15 15 16 16 SATURDAY 17 18 19 19 20 10 10	
9 SATURDAY	
10 SUNDAY	
11	
12	
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14	
15	
16 SATURDAY	
17 SUNDAY	
18 9 20 9	
19 20 S S S S S S S S S S S S S S S S S S	
I hereby certify that I have performed the duties as reported herein.	
EMPLOYEE SIGNATURE: DATE: SUPERVISOR'S APPROVAL:	
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