

**CUYAMA JOINT UNIFIED SCHOOL DISTRICT
 SUBSTITUTE TIME SHEET**

MONTH _____

 SUBSTITUTE'S NAME

YEAR _____

					OFFICE
DATE	DESCRIPTION OF WORK PERFORMED	WHO DID YOU SUB FOR?	START TIME	END TIME	USE ONLY

THIS TIME SHEET IS INCOMPLETE UNTIL ALL REQUIRED SIGNATURES ARE OBTAINED

SUBSTITUE'S SIGNATURE:

VERIFIED BY (Office Secretary):

SUPERINTENDENT'S APPROVAL: