



Federal Programs Title I Time Sheet

(Please print)

Tutor/Teacher: _____ Employee Number: _____

School: _____ Cost Center: _____

Rate of Pay \$ _____

Date	Time In	Time Out	Number of Hours	Signature
TOTAL HOURS				

Reminder: Submit this form and your tutoring rosters by the first (1st) of each month to Federal Programs, Thanks!

I certify that 100% of the time reported on this payroll sheet was spent on an allowable Title I activity aligned with the Equitable Services Plan for the school. The information on this form is true and correct to the best of my knowledge.

Employee Signature _____

Date: _____

Verified by: _____

Date: _____

School Principal/Department Head