

ARRA GRANT TIME CARD

*East Granby Public Schools
East Granby, Connecticut*

Week Start: _____

Week Ending: _____

Employee
Name: _____

Student Name: _____

Allgrove Seymour Middle High Off-Site	Day	Date	Time In	Lunch	Time Out	Total Hrs.	Office Use
School:	Monday						
School:							
School:	Tuesday						
School:							
School:	Wednesday						
School:							
School:	Thursday						
School:							
School:	Friday						
School:							
School:	Saturday						
School:	Sunday						

Employees are responsible for the accuracy of their own time cards.

This time record was made by me, and is correct:

Employee
Signature _____

Teacher (if
applicable) _____

Administrator _____

Maintenance
(if applicable) _____
