MONTGOMERY COUNTY SCHOOLS  
CERTIFIED AND EXEMPT CLASSIFIED EMPLOYEE  
TIME SHEET

Name ___________________________ Pay Period _________ Thru _________

I worked the following days for the Montgomery County Board of Education.

Certified Staff: Record W for each day worked  
Classified Exempt: Record daily contracted hours

<table>
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<tr>
<th>SUNDAY</th>
<th>MONDAY</th>
<th>TUESDAY</th>
<th>WEDNESDAY</th>
<th>THURSDAY</th>
<th>FRIDAY</th>
<th>SATURDAY</th>
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Employees who perform extra service work should complete the Extra Service Records form before payment is rendered. Prior approval must be obtained from supervisor.

NO. REGULAR HOURS/DAYS WORKED ________________

NO. EXTRA HOURS WORKED ____________

I VERIFY I WORKED THE ACTUAL HOURS RECORDED: _______________________________

__________________________________________
SIGNATURE OF EMPLOYEE

__________________________________________
SUPERVISOR/PRINCIPAL

A - Unauthorized absence  
B - Day began work  
C - Compensatory day  
(approved by supt.)  
E - Emergency leave:  
EL - Legal  
EH - Hospital  
ED - Death  
EO - Other  

H - Approved holiday (with pay)  
I - Illness in immediate family  
J - Jury duty  
PL - Approved prof. leave  
NC - Non-contracted day  
PD - Personal leave day  
P - Leave without pay  
S - Personal illness  
T - Day terminated work  
V - Vacation day