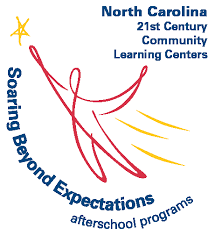
**(Insert your Afterschool Program Name Here)**

21st Century Community Learning Center

|  |  |
| --- | --- |
| **Name:** | **Cohort:** |
| **Position:** | **Start Date of Time Reported:**  **Last Date of Time Reported:** |

|  |  |  |  |
| --- | --- | --- | --- |
| **Date** | **Time In** | **Time Out** | **Hours Recorded** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| **Total Hours** | | |  |



**I certify that the sign-In and sign-out time reflected on this timesheet/work-effort is accurate and that \_\_\_\_\_% of this time was allotted towards the responsibilities of the position stated above.**

|  |  |  |
| --- | --- | --- |
| **Employee’s First and Last Name (Print)** | **Employee Signature:** | **Date:** |
| **Verified by Site Coordinator/ Program Director: (Print)** | **Supervisor Signature:** | **Date:** |

***Below Internal Use Only***



|  |  |  |  |
| --- | --- | --- | --- |
| **Salary Computation** | | | |
| **Rate per Hour** | **Chart of Account Code (ERaCA/BAAS):** | **Total Hours** | **Gross Pay** |
|  |  |  |  |

**Processed by Authorized Finance Officer/Fiscal Agent:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_