

OHIO VALLEY EDUCATIONAL SERVICE CENTER
SUBSTITUTE TEACHER TIME SHEET

Employee's Name (Please Print)

DATE	<i>Name of Teacher Subbing for and District/School</i>	TIME IN	TIME OUT	LUNCH ON/OFF DUTY	DAYS/certified (Circle One)
/ /				On / Off	1 or 1/2
/ /				On / Off	1 or 1/2
/ /				On / Off	1 or 1/2
/ /				On / Off	1 or 1/2
/ /				On / Off	1 or 1/2
/ /				On / Off	1 or 1/2
/ /				On / Off	1 or 1/2
/ /				On / Off	1 or 1/2
/ /				On / Off	1 or 1/2
/ /				On / Off	1 or 1/2
/ /				On / Off	1 or 1/2
/ /				On / Off	1 or 1/2
/ /				On / Off	1 or 1/2
/ /				On / Off	1 or 1/2
/ /				On / Off	1 or 1/2
TOTAL DAYS WORKED					

Employee's Signature

____/____/____
Date

Supervisor's/Superintendent's Signature

____/____/____
Date

rvsd 8.7.2015

Amy Buchtel - Payroll
Ohio Valley ESC
128 East 8th Street
Cambridge OH, 43725
Fax number (740) 439-5736
Phone (740) 439-3558 ext 4233
email: Amy.Buchtel@ovesc.org