

**SCHOOL ADMINISTRATIVE UNIT THIRTY**  
**BI-WEEKLY TIME REPORT**  
FOR FEDERAL PROJECT ONLY

NAME: \_\_\_\_\_ SCHOOL: \_\_\_\_\_ WEEK BEGINNING: \_\_\_\_\_

	MORNING		AFTERNOON		TOTAL
	BEGINS	ENDS	BEGINS	ENDS	
MONDAY					
TUESDAY					
WEDNESDAY					
THURSDAY					
FRIDAY					
TOTAL					

NAME: \_\_\_\_\_ SCHOOL: LHS WEEK BEGINNING: \_\_\_\_\_

	MORNING		AFTERNOON		TOTAL
	BEGINS	ENDS	BEGINS	ENDS	
MONDAY					
TUESDAY					
WEDNESDAY					
THURSDAY					
FRIDAY					
TOTAL					
PAY PERIOD TOTALS					

Federal Project Number \_\_\_\_\_

I certify this is a true record:

Employee's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Principal's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Project Manager's Signature: \_\_\_\_\_ Date: \_\_\_\_\_