



Lights On Timesheet Dec 08/Jan 09

Employee: _____ Center: _____

SSN: _____

Mon.	Hrs.		Tues.	Hrs.		Wed.	Hrs.		Thurs.	Hrs.		Fri.	Hrs.		WEEKLY TOTALS:
	\$12/hr	\$16/hr		\$12/hr	\$16/hr		\$12/hr	\$16/hr		\$12/hr	\$16/hr		\$12/hr	\$16/hr	
12/15			12/16			12/17			12/18			12/19			
12/22			12/23			12/24			12/25			12/26			
12/29			12/30			12/31			1/2			1/3			
1/5			1/6			1/7			1/8			1/9			
1/12			1/13												

\$12.00 Aide; set up, clean up, prep, etc. \$16.00 Direct Teaching; Tutoring, Enrichment, etc. OTHER- Please specify

Hours Worked

Total \$12/hr _____

Total \$16/hr _____

Write Other Hourly Rate Here: Total \$ _____/hr _____

FOR OFFICE USE ONLY

Cohort 3: 9.0200.1290.000.731.00111

Cohort 4: 9.0200.1290.000.715.00110

Cohort 5: 9.0200.1210.000.714.00111

Extended Day Code: 200.1290.000.530.111

Comments: _____

Employee Signature: _____

Date: _____

Facilitator Signature: _____

Date: _____

Program Director: _____

Date: _____



Lights On Timesheet January/February 2009

Employee: _____ Center: _____

SSN: _____

Mon.	Hrs.		Tues.	Hrs.		Wed.	Hrs.		Thurs.	Hrs.		Fri.	Hrs.		WEEKLY TOTALS:
	\$12/hr	\$16/hr		\$12/hr	\$16/hr		\$12/hr	\$16/hr		\$12/hr	\$16/hr		\$12/hr	\$16/hr	
						1/14			1/15			1/16			
1/19			1/20			1/21			1/22			1/23			
1/26			1/27			1/28			1/29			1/30			
2/2			2/3			2/4			2/5			2/6			
2/9			2/10			2/11			2/12			2/13			

\$12.00 Aide; set up, clean up, prep, etc. \$16.00 Direct Teaching; Tutoring, Enrichment, etc. OTHER- Please specify

Hours Worked

Total \$12/hr _____

Total \$16/hr _____

Write Other Hourly Rate Here: Total \$ _____/hr _____

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Cohort 4: 9.0200.1290.000.715.00110

Cohort 5: 9.0200.1210.000.714.00111

Extended Day Code: 200.1290.000.530.111

Comments: _____

Employee Signature: _____

Date: _____

Facilitator Signature: _____

Date: _____

Program Director: _____

Date: _____



Lights On Timesheet February/March 2009

Employee: _____ Center: _____

SSN: _____

Mon.	Hrs.		Tues.	Hrs.		Wed.	Hrs.		Thurs.	Hrs.		Fri.	Hrs.		WEEKLY TOTALS:
	\$12/hr	\$16/hr		\$12/hr	\$16/hr		\$12/hr	\$16/hr		\$12/hr	\$16/hr		\$12/hr	\$16/hr	
2/16			2/17			2/18			2/19			2/20			
2/23			2/24			2/25			2/26			2/27			
3/2			3/3			3/4			3/5			3/6			
3/9			3/10			3/11			3/12			3/13			

\$12.00 Aide; set up, clean up, prep, etc. \$16.00 Direct Teaching; Tutoring, Enrichment, etc. OTHER- Please specify

Hours Worked

Total \$12/hr _____

Total \$16/hr _____

Write Other Hourly Rate Here: Total \$ _____/hr _____

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Cohort 5: 9.0200.1210.000.714.00111

Extended Day Code: 200.1290.000.530.111

Comments: _____

Employee Signature: _____

Date: _____

Facilitator Signature: _____

Date: _____

Program Director: _____

Date: _____



Lights On Timesheet March/April 2009

Employee: _____ Center: _____

SSN: _____

Mon.	Hrs.		Tues.	Hrs.		Wed.	Hrs.		Thurs.	Hrs.		Fri.	Hrs.		WEEKLY TOTALS:
	\$12/hr	\$16/hr		\$12/hr	\$16/hr		\$12/hr	\$16/hr		\$12/hr	\$16/hr		\$12/hr	\$16/hr	
3/16			3/17			3/18			3/19			3/20			
3/23			3/24			3/25			3/26			3/27			
3/30			3/31			4/1			4/2			4/3			
4/6			4/7			4/8			4/9			4/10			
4/13															

\$12.00 Aide; set up, clean up, prep, etc. \$16.00 Direct Teaching; Tutoring, Enrichment, etc. OTHER- Please specify

Hours Worked

Total \$12/hr _____

Total \$16/hr _____

Write Other Hourly Rate Here: Total \$ _____/hr _____

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Cohort 4: 9.0200.1290.000.715.00110

Cohort 5: 9.0200.1210.000.714.00111

Extended Day Code: 200.1290.000.530.111

Comments: _____

Employee Signature: _____ Date: _____

Facilitator Signature: _____ Date: _____

Program Director: _____ Date: _____



Lights On Timesheet April/May 2009

Employee: _____ Center: _____

SSN: _____

Mon.	Hrs.		Tues.	Hrs.		Wed.	Hrs.		Thurs.	Hrs.		Fri.	Hrs.		WEEKLY TOTALS:
	\$12/hr	\$16/hr		\$12/hr	\$16/hr		\$12/hr	\$16/hr		\$12/hr	\$16/hr		\$12/hr	\$16/hr	
			4/14			4/15			4/16			4/17			
4/20			4/21			4/22			4/23			4/24			
4/27			4/28			4/29			4/30			5/1			
5/4			5/5			5/6			5/7			5/8			
5/11			5/12			5/13									

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Hours Worked

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Cohort 5: 9.0200.1210.000.714.00111

Extended Day Code: 200.1290.000.530.111

Comments: _____

Employee Signature: _____ Date: _____

Facilitator Signature: _____ Date: _____

Program Director: _____ Date: _____



Lights On Timesheet May/June 2009

Employee: _____ Center: _____

SSN: _____

Mon.	Hrs.		Tues.	Hrs.		Wed.	Hrs.		Thurs.	Hrs.		Fri.	Hrs.		WEEKLY TOTALS:
	\$12/hr	\$16/hr		\$12/hr	\$16/hr		\$12/hr	\$16/hr		\$12/hr	\$16/hr		\$12/hr	\$16/hr	
									5/14			5/15			
5/18			5/19			5/20			5/21			5/22			
5/25			5/26			5/27			5/28			5/29			
6/1			6/2			6/3			6/4			6/5			
6/8			6/9			6/10			6/11			6/12			

\$12.00 Aide; set up, clean up, prep, etc. \$16.00 Direct Teaching; Tutoring, Enrichment, etc. OTHER- Please specify

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Comments: _____

Employee Signature: _____ Date: _____

Facilitator Signature: _____ Date: _____

Program Director: _____ Date: _____