



AMERICA READS

Biweekly Time Sheet



Student's Name: _____

Panther ID: _____

Phone Number: _____

E-mail: _____

Assigned School: _____

Organization Name: MDCPS (America Reads)

FROM: _____
(Pay Period Beginning)

TO: _____
(Pay Period End)

NOTICE! Enter time **IN** and time **OUT** and total for each day below. White - out, pencil, and/or scratched out entries will not be permitted, use Blue or Black ink pen ONLY. Photocopies will not be allowed.

<i>WEEK 1</i>				
WEEK DAYS	IN	OUT	TOTAL	SUPERVISOR INITIALS
Monday				
Tuesday				
Wednesday				
Thursday				
Friday				
<i>WEEK 1 TOTAL HOURS</i>				

<i>WEEK 2</i>				
WEEK DAYS	IN	OUT	TOTAL	SUPERVISOR INITIALS
Monday				
Tuesday				
Wednesday				
Thursday				
Friday				
<i>WEEK 2 TOTAL HOURS</i>				

Total Hours: _____

Tutor Orientation

Date: _____ Total Hours: _____

Tutor Training

Date: _____ Total Hours: _____

VERIFICATION OF HOURS: This is an accurate record of all time worked at the above-mentioned organization during the period indicated. This work was performed in a satisfactory manner.

Student's Signature

Print Name

Date

Reading Coach's Signature

Print Name

Date

Financial Aid Office Signature

Print Name

Date