

# West Linn-Wilsonville School District

## Private School Proportionate Share Employee Time Report

EMPLOYEE NAME \_\_\_\_\_ Funding Source 1 IDEA - Private School Proportionate Share

SCHOOL \_\_\_\_\_ Funding Source 2 ALL OTHER FUNDS

MONTH \_\_\_\_\_ YEAR \_\_\_\_\_

**SOURCE 1 HOURS (Private School Proportionate Share - IDEA)**

Dates	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Hours																

Dates	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	
Hours																

**SOURCE 2 HOURS (ALL OTHER FUNDS)**

Dates	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Hours																

Dates	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	
Hours																

Employee Signature \_\_\_\_\_ Date \_\_\_\_\_

Supervisors Signature \_\_\_\_\_ Date \_\_\_\_\_

Source 1 hours worked \_\_\_\_\_  
 Source 2 hours worked \_\_\_\_\_  
 Total hours worked \_\_\_\_\_

- Legend:
- S Sick
  - V Vacation
  - H Holiday
  - J Jury Duty
  - B Bereavement