



Coffeeville School District

DR. VIVIAN ROBINSON
SUPERINTENDENT

DEATRICE WHITE
ASSISTANT SUPERINTENDENT

96 Mississippi Street * Coffeeville, MS 38922
Phone (662) 675-8941 * Fax (662) 675-5004

TIMESHEET

Employee Name: _____

District Site: C/O CES CHS Transportation Maintenance Cafeteria Athletics

Date work week began: _____ Date work week ended: _____

DAY	IN	OUT	IN	OUT	TOTAL HOURS FOR OFFICE USE ONLY
MONDAY					
TUESDAY					
WEDNESDAY					
THURSDAY					
FRIDAY					
SATURDAY					
SUNDAY					

TOTAL HOURS _____

Any employee who is not on duty and at work during the times represented will be discharged. A non-certified employee may not work more than forty hours per week in any one job or in a combination of two or more jobs without prior approval from their immediate supervisor. All non-certified employees must take a minimum of a thirty minute lunch break and must sign out and in. The employee may not take the lunch break on the job site except in the campus cafeteria or other designated areas (exceptions are cafeteria workers and teacher assistants responsible for supervising students during their lunch time).

By signing below I certify that the information furnished is a true and accurate accounting of my time worked.

Employee's Signature: _____

Principal/Supervisor's Signature: _____

Contact Person: **Norma Farmer** (662) 675-8941 ext. 1010 or nfarmer@coffeevilleschools.org