



CUESTA COLLEGE ACADEMIC MONTHLY TIME SHEET

Library

Position # _____

Name: _____

Check One:

Regular Substitute 1100-_____-1430-612000

Additional Hours 1100-6002-1220-612000

Banner ID: _____

REG

2/3 LAB

(Please mark if additional hours are regular rate or 2/3 LAB)

For Month Ending: _____

DATE	LOCATION	SUBJECT	HOURS OF SERVICE		HOURS	SUBSTITUTE FOR	REASON FOR ABSENCE
			FROM	TO			
Total Hours:						Rate:	Total Earnings:

Earning Code: _____

REQUIRED SIGNATURES:

Division Chair/Director

Date

Dean of Instruction

Date

Employee

Date