

**BERKELEY COUNTY PUBLIC SCHOOLS
DAILY AND WEEKLY RECORD OF HOURS WORKED – CENTRAL OFFICE
In Compliance with Fair Labor Standards Act and WV Minimum Wage Law**

EMPLOYEE _____ EMPLOYEE ID.# _____

POSITION _____

Day of the Week	Date	Beg. Time Hour/Min	Lunch		Period	Ending Time Hour/Min	Extra-Duty Extra-Curricular Hours Worked	Hours Worked	Amount of Leave Used	Type of Leave Used
			Stop Time Hour/Min	Start Time Hour/Min						
Monday										
Tuesday										
Wednesday										
Thursday										
Friday										
Saturday										
Sunday										
Total Hours										

Day of the Week	Date	Beg. Time Hour/Min	Lunch		Period	Ending Time Hour/Min	Extra-Duty Extra-Curricular Hours Worked	Hours Worked	Amount of Leave Used	Type of Leave Used
			Stop Time Hour/Min	Start Time Hour/Min						
Monday										
Tuesday										
Wednesday										
Thursday										
Friday										
Saturday										
Sunday										
Total Hours										

Actual Extra-Duty/Extra-Curricular Hours Worked Must Be Listed Below

Day of the Week from Above	Date	Beg. Time	Ending Time	Total	Comp Time

LEAVE CODES
S – SICK
P – PERSONAL
J – JURY
V – VACATION
OSE – OUTSIDE SCHOOL ENVIR.
U – UNPAID LEAVE
SB – SCHOOL BUSINESS
C – COMP TIME

I hereby certify that this is a true and accurate representation of all hours that I have worked on behalf of the Board of Education during the designated workweek.

Employees' Signature

Date

Supervisor's Signature

Date

Notes: Any changes must be initialed by both employee and supervisor.

