

**SUBSTITUTE TIME CLAIMS ARE DUE IN THE DISTRICT OFFICE ON THE 25TH  
CONTRACTED EMPLOYEES' TIME CLAIMS ARE DUE ON THE LAST WORKING DAY OF THE MONTH**

CALAVERAS UNIFIED SCHOOL DISTRICT  
P. O. BOX 788  
SAN ANDREAS, CA. 95249

**HOURLY TIME SHEET FOR INDIVIDUAL HOME INSTRUCTION**

\_\_\_\_\_  
School Month of Instruction

\_\_\_\_\_  
Name of Student

\_\_\_\_\_  
Classroom/Core/SSA Teacher

\_\_\_\_\_  
Student's School & Grade

**CIRCLE ONE:      REG.ED. / SPECIAL ED.**

DATE	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
# of Minutes															

SubTotal

DATE	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31
# of Minutes																

SubTotal

STRS1 \_\_\_\_\_  
STR1RF \_\_\_\_\_  
FICA1 \_\_\_\_\_  
FICM1 \_\_\_\_\_  
32WC1 \_\_\_\_\_  
SUI1 \_\_\_\_\_

SCHEDULE SUB32  
ASSIGNMENT 32HTCH  
RANGE \_\_\_\_\_  
STEP \_\_\_\_\_

Total Min

Total Hr

\_\_\_\_\_  
Approval of School Administrator      Date

\_\_\_\_\_  
Printed Employee Name

\_\_\_\_\_  
Employee ID #

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

FUND	RES	PY	GOAL	FUNC	OBJ	SITE	MGR	HOURS	RATE	TOTAL