**BALLARD COUNTY SCHOOLS**
**3465 PADUCAH ROAD, BARLOW, KY 42024**
**CLASSIFIED SEMI-MONTHLY TIME SHEET**

**EMPLOYEE NAME**_____ POSITION_____

**PAY PERIOD:** _____ **TO:** _____

**PLEASE SUPPLY THE APPROPRIATE REASON FOR EACH DAY NOT WORKED USING THE FOLLOWING CODES: P –** Personal; **S –** Illness, self or family; **H** – Holiday; **J** – Jury duty; **D-**Docked; **WC** – Worker's Comp; **NW** – Nonworking days; **FMLA**-Family Medical Leave. (**ONLY 240- and 220-day classified staff use the NW code.**) **Please list only the days that you have worked on the time sheet.**
**EX: 185- OR LESS DAY EMPLOYEES: DO NOT LIST FALL BREAK, CHRISTMAS BREAK, SPRING BREAK. 185-DAY EMPLOYEES ARE PAID FOR THE FOLLOWING FOUR HOLIDAYS: LABOR DAY, THANKSGIVING DAY, CHRISTMAS DAY AND NEW YEARS DAY.**

| DATE MM/DD/YR | TIME IN | TIME OUT | TIME IN | TIME OUT | TOTAL HOURS | NON WORK CODE |
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**TOTAL HOURS FOR PAY PERIOD**_____

***LUNCH TIME IS NOT COUNTED AS WORK TIME**

**This document will remain in the Central Office as a record of your work schedule. This form must be signed and turned in to your immediate supervisor by the ending date of the pay period.**

**I do solemnly swear that on the above date I was unable to perform my school duties and apply for excused sick/personal leave in compliance with the provisions of section 161.155.KRS.**

_____ _____
**Employee's Signature** **Date**

_____ _____
**Supervisor's Signature** **Date**