Employee and Retiree Service Center MONTGOMERY COUNTY PUBLIC SCHOOLS Rockville, Maryland 20850

PACS TIMESHEET EXTRACURRICULAR CLASS 1 OR CLASS 2 ACTIVITIES

Employee	ID	(pleas	e prir	nt)														
School Nu	ool Na	ame _																
Biweekly	Biweekly Pay Period/ to//																	
INSTRUC																		
 Complete this form in ink. Use a separate form for each biweekly pay period. 																		
	-				lete a	senar	ate tin	reshee	t for e	ach sel	nool							
 If you have activities at more than one school, complete a separate timesheet for each school. Complete this timesheet for each activity worked this pay period. 																		
5. Report	each activity worked and		-		~ -	-		day c	olumn	s provi	ded be	low.	Consu	lt you	r time	keepei	for	
	codes if necessary.	ours the	n voui	· alloc	ation 1	alanc	A											
6. ECA-1: DO NOT report more hours than your allocation balance.7. Sign this timesheet in ink and submit to the principal or timekeeper.																		
Get paid on time! DO NOT HOLD TIMESHEETS OR REPORT HOURS PAST THE SCHEDULED PAY PERIOD DATES. THIS COULD RESULT IN A DELAY OF PAY.																		
COULD R	RESULT IN A DELAY ()F PAY																
ECA-1 Acti	vities. Report the activity	code, r	name	and th	e hou	rs wo	rked e	ach d	ay for	that ac	tivity.							
				Week 1							Week 2							
Activity Code	Activity Name	Pay Code	Sat	Sun	Mon	Tue	Wed	Thu	Fri	Sat	Sun	Mon	Tue	Wed	Thu	Fri	Biweek Total	
Code		EC1																
		EC1																
		EC1																
		EC1																
		EC1																
		EC1																
		EC1																
ECA-2 Acti	vity. Report a unit of 1 f	h day of outdoor education participation.																
				Week 1							Week 2							
Activity Name Pay Cod			Sat	Sun	Mon	Tue	Wed	Thu	Fri	Sat	Sun	Mon	Tue	Wed	Thu	Fri	Biweek Total	
Outdoor Education E																		
			•			•						•		•				
This is to correct.	certify that my recor	d of at	tenda	nce,	as sh	own				ertify t e corre		nave	exam	ined t	he at	ove	report and	
		//													/	/		
	Signature, Employe		Date Sig							, Imme	ediate	Super	visor		1	Date		
MCPS F	orm 430-21, 8/11																	