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

PACS TIMESHEET EXTRACURRICULAR CLASS 1 OR CLASS 2 ACTIVITIES

Employee ID $\qquad$ Name (please print)
School Number $\qquad$ School Name

Biweekly Pay Period $\qquad$ 1 $\qquad$ to $\qquad$ 1

## INSTRUCTIONS:

1. Complete this form in ink.
2. Use a separate form for each biweekly pay period.
3. If you have activities at more than one school, complete a separate timesheet for each school.
4. Complete this timesheet for each activity worked this pay period.
5. Report each activity worked and the hours worked for each day in the day columns provided below. Consult your timekeeper for activity codes if necessary.
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.

ECA-1 Activities. Report the activity code, name and the hours worked each day for that activity.

|  |  |  | Week 1 |  |  |  |  |  |  | Week 2 |  |  |  |  |  |  | Biweek Total |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Activity Code | Activity Name | Pay Code | Sat | Sun | Mon | Tue | Wed | Thu | Fri | Sat | Sun | Mon | Tue | Wed | Thu | Fri |  |
|  |  | EC1 |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 0.0 |
|  |  | EC1 |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 0.0 |
|  |  | EC1 |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 0.0 |
|  |  | EC1 |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 0.0 |
|  |  | EC1 |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 0.0 |
|  |  | EC1 |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 0.0 |
|  |  | EC1 |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 0.0 |

ECA-2 Activity. Report a unit of 1 for each day of outdoor education participation.

|  |  | Week 1 |  |  |  |  |  |  | Week 2 |  |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Activity Name | Pay Code | Sat | Sun | Mon | Tue | Wed | Thu | Fri | Sat | Sun | Mon | Tue | Wed | Thu | Fri | Biweek Total |
| Outdoor Education | EC2 |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 0.0 |

This is to certify that my record of attendance, as shown is correct.

This is to certify that I have examined the above report and found it to be correct.

Signature, Employee
$-$
Signature, Immediate Supervisor $-\frac{1}{\text { Date }}$

