

TOWN OF LITTLE COMPTON, RI

Name _____

Department _____
or

Position _____

Organization _____

Week Ending: ____/____/____

Approval _____

Date	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Total
Hours - Type								
Hours Worked								
Other								
Overtime Hours								

Week Ending ____/____/____

Date	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Total
Hours - Type								
Hours Worked								
Other								
Overtime Hours								

Please enter one of the following letters, if applicable, in Hours -Type.
 H=Holiday V=Vacation B=Bereavement T=Training
 S=Sick P=Personal A=Administrative

Leave Hours-Type blank for Normal working hours

Total Regular Hours: _____

Total Overtime Hours: _____

Position codes

- | | | |
|-------------------------|-------------------------------|------------------------|
| 2302 Fiscal Mgt | 3100 Bus Driver | 3200 Bus Monitor |
| 2303 Schl Mgt | ████████████████████ | 3300 Special Ed. Aides |
| 2600 Teacher Aide | 3102 Special Needs Bus Driver | |
| 2800 Custodial | 3103 Non School Bus Driver | |
| 2810 Non Schl Custodial | 3110 Bus Supervisor | |

*Note: A Time Sheet is required for each position worked.
 Time sheets are due by Monday of each Pay Week.
 Any changes / corrections should be noted on next time sheet. State Reason for change.*