

RED BLUFF JOINT UNION HIGH SCHOOL DISTRICT

Certificated Extra Duty Timesheet

2025-2026 School Year

Full Name: _____ **Month:** _____

Date	Time in	Time out	Hours Worked	Describe Work Performed
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				
16				
17				
18				
19				
20				
21				
22				
23				
24				
25				
26				
27				
28				
29				
30				
31				
TOTAL				

I certify that this record includes hours approved by the Supervisor and is a complete and proper basis for payment.

Employee Signature

Date

Supervisor Signature

Date

