

**RIDGEWOOD PUBLIC SCHOOLS  
EMPLOYEE TIME CARD**

Employee Name: \_\_\_\_\_

For the Week Ending: \_\_\_\_\_

Date	School	Specific Job(s)	Time In	Time Out	Hours Worked

Reg. Hours: \_\_\_\_\_

Reg Rate: \_\_\_\_\_

O/T Hours: \_\_\_\_\_

O/T Rate: \_\_\_\_\_

Total Hours: \_\_\_\_\_

Total Wages: \_\_\_\_\_

Account #: \_\_\_\_\_

Employee #: \_\_\_\_\_

Employee Signature: \_\_\_\_\_

Approved By: \_\_\_\_\_

Board Approved: \_\_\_\_\_ yes \_\_\_\_\_ no

Date of Approval: \_\_\_\_\_

**ALL TIME CARDS MUST BE SUBMITTED TO PAYROLL WITHIN 30 DAYS OF DATE OF SERVICE OR BY JUNE 30<sup>TH</sup>, WHICHEVER COMES FIRST, AND COMPLETED WITH CORRECT REQUIRED INFORMATION. FAILURE TO COMPLY MAY RESULT IN NON-PAYMENT.**

I do solemnly declare and certify under the penalties of the law that the within time card is correct in all its particulars; that services rendered are as stated therein; that no bonus has been given or received by any person or persons within the knowledge of this claimant in connection with the above claim; that the amount therein stated is justly due and owing; and that the amount charged is a reasonable one.