

White Sulphur Springs

ADULT EDUCATION

TIME SHEET

Box C
White Sulphur Springs, MT 59645

Class: _____ **Instructor:** _____

Date	Start Time	End Time	Regular Hrs.	Prep. Hrs.	Total Hrs.
TOTALS:					

Employee Signature: _____ **Date:** _____

Supervisor Signature: _____ **Date:** _____