WILLIAMSON COUNTY BOARD OF EDUCATION
CLASSIFIED EMPLOYEES WORK RECORD

Employee's Name: Employee Number:

Location: Pay Period: 07/01/26-07/18/26

DATES	TIME IN A.M.	LUNCH TIME OUT	LUNCH TIME IN	TIME OUT P.M.	EXTRA HOURS WORKED	**SUPERVISOR INITIAL***	TOTAL HOURS WORKED	TYPE OF LEAVE
07/01/26								
07/02/26								
07/03/26	**SYSTEM CLOSED**							
07/06/26								
07/07/26								
07/08/26								
07/09/26								
07/10/26								
07/13/26								
07/14/26								
07/15/26								
07/16/26								
07/17/26								

*I certify that the reported information is correct, and I was not permitted or required to work or perform duties not reported on this time sheet. *Prior approval of extra hours required by supervisior.*

Employee's Signature

Supervisor's Signature

WILLIAMSON COUNTY BOARD OF EDUCATION
CLASSIFIED EMPLOYEES WORK RECORD

Employee's Name: Employee Number:

Location: Pay Period: 07/19/26-08/01/26

DATES	TIME IN A.M.	LUNCH TIME OUT	LUNCH TIME IN	TIME OUT P.M.	EXTRA HOURS WORKED	**SUPERVISOR INITIAL***	TOTAL HOURS WORKED	TYPE OF LEAVE
07/20/26								
07/21/26								
07/22/26								
07/23/26								
07/24/26								
07/27/26								
07/28/26								
07/29/26								
07/30/26								
07/31/26								

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Employee's Signature

Supervisor's Signature

WILLIAMSON COUNTY BOARD OF EDUCATION
CLASSIFIED EMPLOYEES WORK RECORD

Employee's Name: Employee Number:

Location: Pay Period: 08/02/26-08/15/26

DATES	TIME IN A.M.	LUNCH TIME OUT	LUNCH TIME IN	TIME OUT P.M.	EXTRA HOURS WORKED	**SUPERVISOR INITIAL***	TOTAL HOURS WORKED	TYPE OF LEAVE
08/03/26								
08/04/26								
08/05/26								
08/06/26								
08/07/26								
08/10/26								
08/11/26								
08/12/26								
08/13/26								
08/14/26								

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Employee's Signature

Supervisor's Signature

WILLIAMSON COUNTY BOARD OF EDUCATION
CLASSIFIED EMPLOYEES WORK RECORD

Employee's Name: Employee Number:

Location: Pay Period: 08/16/26-08/29/26

DATES	TIME IN A.M.	LUNCH TIME OUT	LUNCH TIME IN	TIME OUT P.M.	EXTRA HOURS WORKED	**SUPERVISOR INITIAL***	TOTAL HOURS WORKED	TYPE OF LEAVE
08/17/26								
08/18/26								
08/19/26								
08/20/26								
08/21/26								
08/24/26								
08/25/26								
08/26/26								
08/27/26								
08/28/26								

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Employee's Signature

Supervisor's Signature

WILLIAMSON COUNTY BOARD OF EDUCATION
CLASSIFIED EMPLOYEES WORK RECORD

Employee's Name: Employee Number:

Location: Pay Period: 08/30/26-09/19/26

DATES	TIME IN A.M.	LUNCH TIME OUT	LUNCH TIME IN	TIME OUT P.M.	EXTRA HOURS WORKED	**SUPER-VISOR INITIAL***	TOTAL HOURS WORKED	TYPE OF LEAVE
08/31/26								
09/01/26								
09/02/26								
09/03/26								
09/04/26								
09/07/26	**SYSTEM CLOSED**							
09/08/26								
09/09/26								
09/10/26								
09/11/26								
09/14/26								
09/15/26								
09/16/26								
09/17/26								
09/18/26								

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Employee's Signature

Supervisor's Signature

WILLIAMSON COUNTY BOARD OF EDUCATION
CLASSIFIED EMPLOYEES WORK RECORD

Employee's Name: Employee Number:

Location: Pay Period: 09/20/26-10/03/26

DATES	TIME IN A.M.	LUNCH TIME OUT	LUNCH TIME IN	TIME OUT P.M.	EXTRA HOURS WORKED	**SUPER-VISOR INITIAL***	TOTAL HOURS WORKED	TYPE OF LEAVE
09/21/26								
09/22/26								
09/23/26								
09/24/26								
09/25/26								
09/28/26								
09/29/26								
09/30/26								
10/01/26								
10/02/26								

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Employee's Signature

Supervisor's Signature

WILLIAMSON COUNTY BOARD OF EDUCATION
CLASSIFIED EMPLOYEES WORK RECORD

Employee's Name: Employee Number:

Location: Pay Period: 10/04/26-10/17/26

DATES	TIME IN A.M.	LUNCH TIME OUT	LUNCH TIME IN	TIME OUT P.M.	EXTRA HOURS WORKED	**SUPER-VISOR INITIAL***	TOTAL HOURS WORKED	TYPE OF LEAVE
10/05/26								
10/06/26								
10/07/26								
10/08/26								
10/09/26								
10/12/26								
10/13/26								
10/14/26	**SYSTEM CLOSED**							
10/15/26	**SYSTEM CLOSED**							
10/16/26	**SYSTEM CLOSED**							

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Employee's Signature

Supervisor's Signature

WILLIAMSON COUNTY BOARD OF EDUCATION
CLASSIFIED EMPLOYEES WORK RECORD

Employee's Name: Employee Number:

Location: Pay Period: 10/18/26-10/31/26

DATES	TIME IN A.M.	LUNCH TIME OUT	LUNCH TIME IN	TIME OUT P.M.	EXTRA HOURS WORKED	**SUPER-VISOR INITIAL***	TOTAL HOURS WORKED	TYPE OF LEAVE
10/19/26								
10/20/26								
10/21/26								
10/22/26								
10/23/26								
10/26/26								
10/27/26								
10/28/26								
10/29/26								
10/30/26								

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Employee's Signature

Supervisor's Signature

WILLIAMSON COUNTY BOARD OF EDUCATION
CLASSIFIED EMPLOYEES WORK RECORD

Employee's Name: Employee Number:

Location: Pay Period: 11/01/26-11/14/26

DATES	TIME IN A.M.	LUNCH TIME OUT	LUNCH TIME IN	TIME OUT P.M.	EXTRA HOURS WORKED	**SUPER-VISOR INITIAL***	TOTAL HOURS WORKED	TYPE OF LEAVE
11/02/26								
11/03/26								
11/04/26								
11/05/26								
11/06/26								
11/09/26								
11/10/26								
11/11/26								
11/12/26								
11/13/26								

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Employee's Signature

Supervisor's Signature

WILLIAMSON COUNTY BOARD OF EDUCATION
CLASSIFIED EMPLOYEES WORK RECORD

Employee's Name: Employee Number:

Location: Pay Period: 11/15/26-11/28/26

DATES	TIME IN A.M.	LUNCH TIME OUT	LUNCH TIME IN	TIME OUT P.M.	EXTRA HOURS WORKED	**SUPER-VISOR INITIAL***	TOTAL HOURS WORKED	TYPE OF LEAVE
11/16/26								
11/17/26								
11/18/26								
11/19/26								
11/20/26								
11/23/26	**SYSTEM CLOSED**							
11/24/26	**SYSTEM CLOSED**							
11/25/26	**SYSTEM CLOSED**							
11/26/26	**SYSTEM CLOSED**							
11/27/26	**SYSTEM CLOSED**							

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Employee's Signature

Supervisor's Signature

WILLIAMSON COUNTY BOARD OF EDUCATION
CLASSIFIED EMPLOYEES WORK RECORD

Employee's Name: Employee Number:

Location: Pay Period: 11/29/26-12/12/26

DATES	TIME IN A.M.	LUNCH TIME OUT	LUNCH TIME IN	TIME OUT P.M.	EXTRA HOURS WORKED	**SUPER-VISOR INITIAL***	TOTAL HOURS WORKED	TYPE OF LEAVE
11/30/26								
12/01/26								
12/02/26								
12/03/26								
12/04/26								
12/07/26								
12/08/26								
12/09/26								
12/10/26								
12/11/26								

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Employee's Signature

Supervisor's Signature

WILLIAMSON COUNTY BOARD OF EDUCATION
CLASSIFIED EMPLOYEES WORK RECORD

Employee's Name: Employee Number:

Location: Pay Period: 12/13/26-01/02/27

DATES	TIME IN A.M.	LUNCH TIME OUT	LUNCH TIME IN	TIME OUT P.M.	EXTRA HOURS WORKED	**SUPER-VISOR INITIAL***	TOTAL HOURS WORKED	TYPE OF LEAVE
12/14/26								
12/15/26								
12/16/26								
12/17/26								
12/18/26								
12/21/26	**SYSTEM CLOSED**							
12/22/26	**SYSTEM CLOSED**							
12/23/26	**SYSTEM CLOSED**							
12/24/26	**SYSTEM CLOSED**							
12/25/26	**SYSTEM CLOSED**							
12/28/26	**SYSTEM CLOSED**							
12/29/26	**SYSTEM CLOSED**							
12/30/26	**SYSTEM CLOSED**							
12/31/26	**SYSTEM CLOSED**							
01/01/27	**SYSTEM CLOSED**							

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Employee's Signature

Supervisor's Signature

WILLIAMSON COUNTY BOARD OF EDUCATION
CLASSIFIED EMPLOYEES WORK RECORD

Employee's Name: Employee Number:

Location: Pay Period: 01/03/27-01/16/27

DATES	TIME IN A.M.	LUNCH TIME OUT	LUNCH TIME IN	TIME OUT P.M.	EXTRA HOURS WORKED	**SUPER-VISOR INITIAL***	TOTAL HOURS WORKED	TYPE OF LEAVE
01/04/27								
01/05/27								
01/06/27								
01/07/27								
01/08/27								
01/11/27								
01/12/27								
01/13/27								
01/14/27								
01/15/27								

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Employee's Signature

Supervisor's Signature

WILLIAMSON COUNTY BOARD OF EDUCATION
CLASSIFIED EMPLOYEES WORK RECORD

Employee's Name: Employee Number:

Location: Pay Period: 01/17/27-01/30/27

DATES	TIME IN A.M.	LUNCH TIME OUT	LUNCH TIME IN	TIME OUT P.M.	EXTRA HOURS WORKED	**SUPER-VISOR INITIAL***	TOTAL HOURS WORKED	TYPE OF LEAVE
01/18/27	**SYSTEM CLOSED**							
01/19/27								
01/20/27								
01/21/27								
01/22/27								
01/25/27								
01/26/27								
01/27/27								
01/28/27								
01/29/27								

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Employee's Signature

Supervisor's Signature

WILLIAMSON COUNTY BOARD OF EDUCATION
CLASSIFIED EMPLOYEES WORK RECORD

Employee's Name: Employee Number:

Location: Pay Period: 01/31/27-02/13/27

DATES	TIME IN A.M.	LUNCH TIME OUT	LUNCH TIME IN	TIME OUT P.M.	EXTRA HOURS WORKED	**SUPER-VISOR INITIAL***	TOTAL HOURS WORKED	TYPE OF LEAVE
02/01/27								
02/02/27								
02/03/27								
02/04/27								
02/05/27								
02/08/27								
02/09/27								
02/10/27								
02/11/27								
02/12/27								

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Employee's Signature

Supervisor's Signature

WILLIAMSON COUNTY BOARD OF EDUCATION
CLASSIFIED EMPLOYEES WORK RECORD

Employee's Name: Employee Number:

Location: Pay Period: 02/14/27-02/27/27

DATES	TIME IN A.M.	LUNCH TIME OUT	LUNCH TIME IN	TIME OUT P.M.	EXTRA HOURS WORKED	**SUPER-VISOR INITIAL***	TOTAL HOURS WORKED	TYPE OF LEAVE
02/15/27								
02/16/27								
02/17/27								
02/18/27								
02/19/27								
02/22/27								
02/23/27								
02/24/27								
02/25/27								
02/26/27								

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Employee's Signature

Supervisor's Signature

WILLIAMSON COUNTY BOARD OF EDUCATION
CLASSIFIED EMPLOYEES WORK RECORD

Employee's Name: Employee Number:

Location: Pay Period: 02/28/27-03/13/27

DATES	TIME IN A.M.	LUNCH TIME OUT	LUNCH TIME IN	TIME OUT P.M.	EXTRA HOURS WORKED	**SUPER-VISOR INITIAL***	TOTAL HOURS WORKED	TYPE OF LEAVE
03/01/27								
03/02/27								
03/03/27								
03/04/27								
03/05/27								
03/08/27								
03/09/27								
03/10/27								
03/11/27								
03/12/27								

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Employee's Signature

Supervisor's Signature

WILLIAMSON COUNTY BOARD OF EDUCATION
CLASSIFIED EMPLOYEES WORK RECORD

Employee's Name: Employee Number:

Location: Pay Period: 03/14/27-04/03/27

DATES	TIME IN A.M.	LUNCH TIME OUT	LUNCH TIME IN	TIME OUT P.M.	EXTRA HOURS WORKED	**SUPER-VISOR INITIAL***	TOTAL HOURS WORKED	TYPE OF LEAVE
03/15/27	**SYSTEM CLOSED**							
03/16/27	**SYSTEM CLOSED**							
03/17/27	**SYSTEM CLOSED**							
03/18/27	**SYSTEM CLOSED**							
03/19/27	**SYSTEM CLOSED**							
03/22/27								
03/23/27								
03/24/27								
03/25/27								
03/26/27	**SYSTEM CLOSED**							
03/29/27								
03/30/27								
03/31/27								
04/01/27								
04/02/27								

*I certify that the reported information is correct, and I was not permitted or required to work or perform duties not reported on this time sheet. *Prior approval of extra hours required by supervisior.*

Employee's Signature

Supervisor's Signature

WILLIAMSON COUNTY BOARD OF EDUCATION
CLASSIFIED EMPLOYEES WORK RECORD

Employee's Name: Employee Number:

Location: Pay Period: 04/04/27-04/17/27

DATES	TIME IN A.M.	LUNCH TIME OUT	LUNCH TIME IN	TIME OUT P.M.	EXTRA HOURS WORKED	**SUPER-VISOR INITIAL***	TOTAL HOURS WORKED	TYPE OF LEAVE
04/05/27								
04/06/27								
04/07/27								
04/08/27								
04/09/27								
04/12/27								
04/13/27								
04/14/27								
04/15/27								
04/16/27								

*I certify that the reported information is correct, and I was not permitted or required to work or perform duties not reported on this time sheet. *Prior approval of extra hours required by supervisior.*

Employee's Signature

Supervisor's Signature

WILLIAMSON COUNTY BOARD OF EDUCATION
CLASSIFIED EMPLOYEES WORK RECORD

Employee's Name: Employee Number:

Location: Pay Period: 04/18/27-05/01/27

DATES	TIME IN A.M.	LUNCH TIME OUT	LUNCH TIME IN	TIME OUT P.M.	EXTRA HOURS WORKED	**SUPER-VISOR INITIAL***	TOTAL HOURS WORKED	TYPE OF LEAVE
04/19/27								
04/20/27								
04/21/27								
04/22/27								
04/23/27								
04/26/27								
04/27/27								
04/28/27								
04/29/27								
04/30/27								

*I certify that the reported information is correct, and I was not permitted or required to work or perform duties not reported on this time sheet. *Prior approval of extra hours required by supervisior.*

Employee's Signature

Supervisor's Signature

WILLIAMSON COUNTY BOARD OF EDUCATION
CLASSIFIED EMPLOYEES WORK RECORD

Employee's Name: Employee Number:

Location: Pay Period: 05/02/27-05/15/27

DATES	TIME IN A.M.	LUNCH TIME OUT	LUNCH TIME IN	TIME OUT P.M.	EXTRA HOURS WORKED	**SUPER-VISOR INITIAL***	TOTAL HOURS WORKED	TYPE OF LEAVE
05/03/27								
05/04/27								
05/05/27								
05/06/27								
05/07/27								
05/10/27								
05/11/27								
05/12/27								
05/13/27								
05/14/27								

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Employee's Signature

Supervisor's Signature

WILLIAMSON COUNTY BOARD OF EDUCATION
CLASSIFIED EMPLOYEES WORK RECORD

Employee's Name: Employee Number:

Location: Pay Period: 05/16/27-05/29/27

DATES	TIME IN A.M.	LUNCH TIME OUT	LUNCH TIME IN	TIME OUT P.M.	EXTRA HOURS WORKED	**SUPER-VISOR INITIAL***	TOTAL HOURS WORKED	TYPE OF LEAVE
05/17/27								
05/18/27								
05/19/27								
05/20/27								
05/21/27								
05/24/27								
05/25/27								
05/26/27								
05/27/27								
05/28/27								

*I certify that the reported information is correct, and I was not permitted or required to work or perform duties not reported on this time sheet. *Prior approval of extra hours required by supervisior.*

Employee's Signature

Supervisor's Signature

WILLIAMSON COUNTY BOARD OF EDUCATION
CLASSIFIED EMPLOYEES WORK RECORD

Employee's Name: Employee Number:

Location: Pay Period: 05/30/27-06/19/27

DATES	TIME IN	LUNCH	LUNCH	TIME OUT	EXTRA	**SUPER-VISOR**	TOTAL	TYPE OF
05/31/27	**SYSTEM CLOSED**							
06/01/27								
06/02/27								
06/03/27								
06/04/27								
06/07/2027								
06/08/2027								
06/09/2027								
06/10/2027								
06/11/2027								
06/14/27								
06/15/27								
06/16/27								
06/17/27								
06/18/27								

*I certify that the reported information is correct, and I was not permitted or required to work or perform duties not reported on this time sheet. *Prior approval of extra hours required by supervisior.*

Employee's Signature

Supervisor's Signature

WILLIAMSON COUNTY BOARD OF EDUCATION
CLASSIFIED EMPLOYEES WORK RECORD

Employee's Name: Employee Number:

Location: Pay Period: 06/20/27-06/30/27

DATES	TIME IN A.M.	LUNCH TIME OUT	LUNCH TIME IN	TIME OUT P.M.	EXTRA HOURS WORKED	**SUPER-VISOR INITIAL***	TOTAL HOURS WORKED	TYPE OF LEAVE
06/21/27								
06/22/27								
06/23/27								
06/24/27								
06/25/27								
06/28/27								
06/29/27								
06/30/27								

*I certify that the reported information is correct, and I was not permitted or required to work or perform duties not reported on this time sheet. *Prior approval of extra hours required by supervisior.*

Employee's Signature

Supervisor's Signature