

GREAT NECK UNION FREE SCHOOL DISTRICT
Employee Semi-Monthly Payroll Form for Homebound Instruction

Employee's Name: _____ **School or Location:** _____

Employee's ID #: _____ **Period Ending:** /15/ or /30 or 31/

Job Title: Homebound

Budget Code (Elementary): A2110-1204

Budget Code (Secondary): A2110-1307

Budget Code (Special Education): A2250-1307

(CIRCLE)

	(CIRCLE)		Hours		Total		Student Name/Parent Signature
	Date	Subject	In	Out	Hours	Daily*	
1	16						
2	17						
3	18						
4	19						
5	20						
6	21						
7	22						
8	23						
9	24						
10	25						
11	26						
12	27						
13	28						
14	29						
15	30						
	31						

Grand Total: _____

Time sheets are to be submitted in ink at the end of the semi-monthly period.

Approved for payment:

_____ Date

_____ Administrator's Signature Date