District _____ County _____ Code _____

Oklahoma Schools COVID-19 Prevention (723)
Time Sheet 2022-2023

Employee Name	
Position	
Location	

Date	Job Description	Time In	Time Out	Total Time Spent
Total Hours				

I certify that this is a true and correct report of the actual hours I worked during this period.

_____

Employee Signature Date

_____

Supervisor Signature Date