

Casual Time Sheet

Please Check the Following			
	NAPE		Labrador
	CUPE		Western
	CUPE 1560		Nova Central
			Eastern

Employee Name _____

Employee Number _____

Pay Period Ending Date _____

Shift/Weekend Differential Hours:
Please indicate the hours worked between 4:00 PM and 8:00 AM

Leave Types
 Stat Holiday - STAT Sick Leave - SICK
 Family Leave - FAM Workers Comp - WCB
 Brevavement - BREV

You must place X in one
of the below options

Week #	Date	Time		Regular Hours	Shift/Wkd Diff Hours	Leave		Position	School #	You must place X in one of the below options			Indicate the name of the Employee you are replacing	Other Explanation
		From	To			Hours	Type			Vacant Position	Replacing Employee	Other (must explain)		
Week # 1	Thursday													
	Friday													
	Saturday													
	Sunday													
	Monday													
	Tuesday													
	Wednesday													
Week # 2	Thursday													
	Friday													
	Saturday													
	Sunday													
	Monday													
	Tuesday													
	Wednesday													

Total Hours _____

Approved By: _____

Employee Signature: _____