

ADJUNCT		BOSSIER PARISH COMMUNITY COLLEGE					
ATTENDANCE RECORD FOR CONTRACT							8/1/2000
NAME OF EMPLOYEE							
PAY PERIOD							
FROM:	TO:	HOURS					
TIME WORKED (HOURS)							
MONTH:	Course-Section	Course-Section	Course-Section	Course-Section	Course-Section	Course-Section	Course-Section
15							
16							
17							
18							
19							
20							
21							
22							
23							
24							
25							
26							
27							
28							
29							
30							
31 (if applicable)							
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13							
14							
TOTAL							
I CERTIFY THAT I HAVE WORKED ON THE DATES SPECIFIED							
CERTIFIED CORRECT - EMPLOYEE:							
SUPERVISOR:							

ADJUNCT/POSITIVE-TIME REPORTING		BOSSIER PARISH COMMUNITY COLLEGE				
ATTENDANCE RECORD FOR CONTRACT						8/1/2000
NAME OF EMPLOYEE						
PAY PERIOD						
FROM:	TO:	HOURS				
TIME WORKED (HOURS)						
MONTH:	Course-Section	Time In	Time Out	Course Section	Time In	Time Out
15						
16						
17						
18						
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20						
21						
22						
23						
24						
25						
26						
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31 (if applicable)						
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12						
13						
14						
TOTAL						
I CERTIFY THAT I HAVE WORKED ON THE DATES SPECIFIED						
CERTIFIED CORRECT - EMPLOYEE:						
SUPERVISOR:						

ADJUNCT/POSITIVE-TIME REPORTING	BOSSIER PARISH COMMUNITY COLLEGE
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ATTENDANCE RECORD FOR CONTRACT				8/1/2000
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NAME OF EMPLOYEE				
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PAY PERIOD				
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FROM:	TO:	HOURS		
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TIME WORKED (HOURS)				
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MONTH:	Course-Section	Time In	Time Out	Description of Duties
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31 (if applicable)				
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TOTAL				
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I CERTIFY THAT I HAVE WORKED ON THE DATES SP	
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CERTIFIED CORRECT - EMPLOYEE:	
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	SUPERVISOR:
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SUMMER ADJUNCT		BOSSIER PARISH COMMUNITY COLLEGE					
ATTENDANCE RECORD FOR CONTRACT					A	B	C
NAME OF EMPLOYEE							
PAY PERIOD							
FROM:	TO:	HOURS					
TIME WORKED (HOURS)							
MONTH:	Course-Section	Course-Section	Course-Section	Course-Section	Course-Section	Course-Section	
15							
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TOTAL							
I CERTIFY THAT I HAVE WORKED ON THE DATES SPECIFIED							
CERTIFIED CORRECT - EMPLOYEE:							
		SUPERVISOR:					

SUMMER ADJUNCT/POSITIVE-TM REPORT		BOSSIER PARISH COMMUNITY COLLEGE				
ATTENDANCE RECORD FOR CONTRACT				A	B	C
NAME OF EMPLOYEE						
PAY PERIOD						
FROM:	TO:	HOURS				
TIME WORKED (HOURS)						
MONTH:	Course-Section	Total Hours	Time In	Time Out	DESCRIPTION OF DUTIES	
15						
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TOTAL						
I CERTIFY THAT I HAVE WORKED ON THE DATES SPECIFIED						
CERTIFIED CORRECT - EMPLOY						
SUPERVISOR:						