

PART-TIME WORKER

<i>Bossier Parish Community College</i>				
ATTENDANCE RECORD				
NAME OF EMPLOYEE		DEPARTMENT		
PAYPERIOD				
FROM:	TO:			
TIME WORKED (HOURS)				
	HOURS	TIME IN	TIME OUT	Description of Duties
SUNDAY				
MONDAY				
TUESDAY				
WEDNESDAY				
THURSDAY				
FRIDAY				
SATURDAY				
SUNDAY				
MONDAY				
TUESDAY				
WEDNESDAY				
THURSDAY				
FRIDAY				
SATURDAY				
TOTAL				
I CERTIFY THAT I HAVE WORKED THE HOURS SPECIFIED ON THE DATES ABOVE:				
			CERTIFIED CORRECT:	
			EMPLOYEE:	
			SUPERVISOR:	