

TIME DISTRIBUTION SHEET

Name:
Month/Year:
Employee's Name:

Employee ID#:
Position:
Submission Date:

Day & Time	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31
8am																															
9am																															
10am																															
11am																															
12pm																															
1pm																															
2pm																															
3pm																															
4pm																															
5pm																															
Fund Source (s)																															

<i>Activities</i>	
1 - Recruitment	8 - Data & Info Services
2 - Retention	9 - Transportation
3 - Instruction	10 - Professional Dev
4 - Assessment	11 - Program Planning
5 - Counseling	12 - Fiscal
6 - Administration	13 - Clerical
7 - Child Care	14 - Other:

<i>Funding Sources</i>
1 - Federal Basic
2 - Federal El Civics
3 - State Basic
4 - State Performance
5 - State Public Assistance
6 - Unrestricted
7 - Other:

Employee's Signature & Date

Supervisor's Signature & Date