



**Bloom-Carroll Local School District
APPLICATION FOR PAY
OVERTIME / EXTRA TIME SHEET
REGULAR / CONTRACTED EMPLOYEE**

Return completed form to the Payroll Office by the 1st and 15th of each month. Contact Caprice Dicken at 614-834-6704 with any questions.

Name	
Address	
Telephone	Email

PLEASE CHECK ALL THAT APPLY:

- | | | | |
|-------------|----------------|-----------|-----------|
| COOK | BUS DRIVER | CUSTODIAN | DETENTION |
| MAINTENANCE | AIDE | SECRETARY | TEACHER |
| OTHER | Describe _____ | | |

DATE (MM/DD/YYYY)	START TIME	END TIME	TOTAL HOURS (enter as decimal, not fraction)	EXPLANATION
TOTAL HOURS FOR PAY PERIOD				

Employee Signature	Supervisor Signature
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