



**Bloom-Carroll Local School District**  
**TIME SHEET**  
**TUTOR / HOME INSTRUCTION**

Return completed form to the Payroll Office by the 1<sup>st</sup> and 15<sup>th</sup> of each month.  
 Contact Cheryl Haile at 740-756-9728 or cheryl.haile@bloomcarroll.org with any questions.

Tutor / Home Instructor Name	
Address	
Email	Student Name & Grade

DATE (MM/DD/YYYY)	START TIME	END TIME	TOTAL HOURS (enter as decimal, not fraction)	EXPLANATION (student name, prep time, etc.)
<b>TOTAL HOURS FOR PAY PERIOD</b>			<b>0.00</b>	<b>← Please calculate your hours</b>

Tutor / Home Instructor Signature	Date
Administrator Signature	Date