

Central Office
4215 Avenue I
Scottsbluff NE
308-635-3696
(F) 308-635-0680

Southern Satellite
Box 77, 1114 Toledo
Sidney NE 69162
308-254-4677
(F) 308-254-5371

Northern Satellite
Kline Center, CSC
Chadron NE 69369
308-432-6495
(F) 308-432-6495

Professional Development
308-635-0661

Early Childhood
308-635-3427



Educational Service Unit #13

BA6

CERTIFICATED EMPLOYEE

MONTHLY WORK REPORT FORM

Submitted by: _____ Month: _____
Position or Kind of Work: _____

Date	Time		Total Hours Worked		Date	Time		Total Hours Worked
	Started	Ended				Started	Ended	

Total Hours for Month(s): _____

Rate of Pay: _____

TOTAL AMOUNT DUE: _____

Signature of person submitting report: _____

Signature of Supervisor: _____

Approved for payment out of _____ fund.

By: _____ Title: _____

