

Certificated (Extra Hours)

SAN LEANDRO UNIFIED SCHOOL DISTRICT

DUE IN PAYROLL ON THE 5th OF EACH MONTH

1145 Aladdin Ave, San Leandro, CA 94577

WARRANTS ARE ISSUED ON THE LAST WORKING DAY OF THE MONTH

Classified (510) 667-3517

ADMINISTRATOR APPROVAL REQUIRED

Certificated (510) 667-3516

LAST NAME / FIRST NAME (PLEASE PRINT)	Month (6-31)	Month (1-5)	Year

PSL (Employee ID) Number

Job Title

DATE	SITE	Frontline Conf # (if applicable)	BUDGET #	SUB FOR	REASON	FROM-TO	TOTAL HOURS	ADMINISTRATOR APPROVAL
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								
1								
2								
3								
4								
5								
*EMPLOYEE SIGNATURE			DATE		TOTAL HOURS			

FOR PAYROLL USE ONLY
x
HOURS      RATE

\* YOU ARE RESPONSIBLE FOR ACCURATE COMPLETION OF YOUR TIMESHEET

# San Leandro Unified School District

## Timesheet Instructions for Certificated Extra Hours



Filling out your timesheet accurately and turning it in on time is necessary to ensure you get paid on-time and correctly. If you are missing information Payroll staff may need to return your timesheet which could delay your payment. **Scan the QR code for further instructions.**

### Pick the right Timesheet to use

<b>CSEA - Extra Hours</b>	For CSEA PERMANENT employees who work <b>LESS than 7.5 hours a day</b>
<b>CSEA - Overtime</b>	For CSEA Permanent employees who work <b>7.5 hours or MORE</b>
<b>T/T - Overtime</b>	For Teamsters & Trade employees who work <b>7.5 hours or MORE</b>
<b>Classified - Subs Only</b>	All classified subs. For more details see the QR code
<b>Certificated - Extra Hours</b>	Extra hours worked for all certificated employees
<b>Certificated - Substitute</b>	Certificated substitute teachers

### Fill out the top correctly

ADMINISTRATOR APPROVAL REQUIRED

The month the timesheet begins in and ends in. For example below a timesheet running Sept 6 through Oct 5.

Your Last and First Name (LEGAL name as written on your Social Security card)		Sep	Oct	2025
LAST NAME / FIRST NAME (PLEASE PRINT)		Month (6-31)	Month (1-5)	Year
Your Employee ID (REQUIRED for accurate/prompt processing)		Your Job Title		
PSL (Employee ID) Number		Job Title		

### Enter each line/hours

DATE	SITE	Frontline Conf # (if applicable)	BUDGET #	SUB FOR	REASON	FROM-TO	TOTAL HOURS	ADMINISTRATOR APPROVAL
6	Site or Code	Frontline code (if available)	Account Code String Here	Who you subbed for	Reason for extra hours	Time From and To	# Hours	
7								
8	I.e. SLHS or 16					I.e. 4pm-5pm		
9			See your school office for help on fields you don't know how to fill out.					
10								

### Coding/Admin Approval

Office and admin staff - Ensure each line is coded to the correct budget.

Administrators - Initial or full sign **each** line on the timesheet. Total the Hours at the bottom and **full sign** next to that.

Original approved timesheets are **due to Payroll by the 5th of the month** to ensure warrant distribution on the last working day of the month. Failure to meet this deadline may result in delay of payment.

5-6pm	1	Admin - initial here
5-6pm	1	Admin - initial here
Total and full sign at bottom		
<b>TOTAL HOURS</b>	<b>2</b>	Admin - full sign

### Timesheet Timeline

Timesheets start  
on the 6th of the  
prior month.

Timesheets end  
the 5th of the  
current month.

Timesheets are  
**due by the 5th** of  
the month.

Timesheet Paid  
on that month's  
paycheck.

