

*** Indicates Required Field**



**Haverhill Public Schools
BiWeekly Payroll Timesheet**



* School/Department:	Principal/Supervisor Name:	* Principal/Supervisor Signature:	* Account # ????????.4.?????????.???.???.???.??? ----- .4. -----
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Pay Period: **11**

Start Date: 11/09/2025

End Date: 11/22/2025

Pay Date: **Wednesday 11/26/2025**

**DUE:
THURSDAY
11/20/2025**

		Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday		
	Wk 1	11/09/2025	11/10/2025	11/11/2025	11/12/2025	11/13/2025	11/14/2025	11/15/2025		
	Wk 2	11/16/2025	11/17/2025	11/18/2025	11/19/2025	11/20/2025	11/21/2025	11/22/2025		
* Employee LEGAL Name: * PRINT: Last, First, Mid Int									* Weekly Total	
* Employee Signature:									<input type="text"/>	
* Time Entry Description/ Specified Job Title:									* Weekly Total	* Grand Total
Notes: (for office use only)									<input type="text"/>	

* Employee LEGAL Name: * PRINT: Last, First, Mid Int									* Weekly Total	
* Employee Signature:									<input type="text"/>	
* Time Entry Description/ Specified Job Title:									* Weekly Total	* Grand Total
Notes: (for office use only)									<input type="text"/>	

* Employee LEGAL Name: * PRINT: Last, First, Mid Int									* Weekly Total	
* Employee Signature:									<input type="text"/>	
* Time Entry Description/ Specified Job Title:									* Weekly Total	* Grand Total
Notes: (for office use only)									<input type="text"/>	

This certifies the above has worked 100% of his/her time for this pay period on the Federal Grant Program listed above