

* 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: **14**

Start Date: 12/21/2025

End Date: 01/03/2026

Pay Date **01/09/2026**

DUE:
01/02/2026

		Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday			
Wk 1		12/21/2025	12/22/2025	12/23/2025	12/24/2025	12/25/2025	12/26/2025	12/27/2025			
Wk 2		12/28/2025	12/29/2025	12/30/2025	12/31/2025	01/01/2026	01/02/2026	01/03/2026			
* Employee LEGAL Name: * PRINT: Last, First, Mid Int									<u>* Weekly Total</u>		
* Employee Signature:									<input type="text"/>		
* Time Entry Description/ Specified Job Title:									<u>* Weekly Total</u>	<u>* Grand Total</u>	
Notes: (for office use only)									<input type="text"/>		

* Employee LEGAL Name: * PRINT: Last, First, Mid Int									<u>* Weekly Total</u>		
* Employee Signature:									<input type="text"/>		
* Time Entry Description/ Specified Job Title:									<u>* Weekly Total</u>	<u>* Grand Total</u>	
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* Employee LEGAL Name: * PRINT: Last, First, Mid Int									<u>* Weekly Total</u>		
* Employee Signature:									<input type="text"/>		
* Time Entry Description/ Specified Job Title:									<u>* Weekly Total</u>	<u>* Grand Total</u>	
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