INDIVIDUAL TIME REPORT
Highly Gifted Mentors
Lincoln Public Schools
Lincoln, Nebraska

Name_____ Social Security No._____Location_____

Job Code-Mentor Account No. 01.1310.11162. .014 (H.S.) Payroll Period_____ to _____

Date																																								Total Hours
Students	M	T	W	T	F	S	S	M	T	W	T	F	S	S	M	T	W	T	F	S	S	M	T	W	T	F	S	S	M	T	W	T	F	S	S					
Total Hrs.																																								

I certify the above time report is complete and true.

_____
Employee's signature

_____
Supervisor's signature

Revised 9/29/2004