Billings Public Schools Short Term Assignments

	School Year		
Name		Employee #	
School (place of extra-curricular event)		(circle one)	
	o the Activities Office loca	tor or Principal for approval. Adminated at the Warehouse, Attention:	
Date	Activity	Duty (clock, tickets, Book, officiate, etc)	Total Hours To Be Paid
*			0
*			0
			<u> </u>
		TOTAL	
		TOTAL	
*Certified st		two free activities on each tile fy the above to be correct and compensation	
PAYROLL USE	ONLY		
X	=	Employee Signature	Date
Hours Rate	Pay	Building Supervisor	Date
101-81-720-35001	50-000	<i>5</i> 1	
201-81-720-35001	50-000	Director of Activities	Date
184-30-700-34001 Revised August 20		note; Non certified staff's hourly rate will	be calculate by Payroll