Seguin Independent School District Business Services - Payroll <u>Video Scoreboard Time Sheet</u>											
Check one- Teacher/Staff											
Employe	ee or Student Name (print clearly)	-			Student				Employee ID #		
Event				Athletics /Technology Campus/Department							
Date and Na	me of Event (i.e. 8/31/17 Varsity vs. Car	-						Budge	t Code		
Circle Applicable Event, Position & Rate POSITION AND PAY RATE											
					non An			Camera			
			or/Script		1		Play	-	rator		
	EVENT		r Student								
	FOOTBALL Varsit		-	80 50	45 40	80	- 40	45 40	40 35		
	Sub Varsity 2 game		-	80	40	_	-	40 45	40		
	*Each Additional Sub Varsity Game	-	-	20	15	20	15	20	15		
	SOCCER Varsit	-	-	80	45	-	-	80	45		
	TRACK All Da		-	200	100	-	-	100	75		
	Half Da		-	80	45	-	-	50	40		
	BAND COMPETITION (12 hrs)	220	-	220	120	-	-	140	120		
Employee/Student Signature: Amount Due   Event Supervisor Signature: ** Approved Adjustment											
Budget Specialist Signature:							Total Amount Due \$				
**Associate Superintendent Of Technology Signature:											
The last Friday of the month is the pay period end date for all extra duty. Timesheets must be submitted to the payroll office by the following Friday. * In addition to other sub varsity game(s) worked on the same day. ** Rate adjustments must be authorized by Associate Superintendent Of Technology.											