



CUESTA COLLEGE ACADEMIC MONTHLY TIME SHEET

Emeritus Non-Credit Sub

Position # _____

Name: _____

Banner ID: _____

Check One:

Regular Substitute

Long-Term Substitute

LEC

LAB

(Please use a separate timesheet for LEC and LAB hours)

For Month Ending:

DATE	LOCATION	SUBJECT	HOURS OF SERVICE		HOURS	SUBSTITUTE FOR	REASON FOR ABSENCE
			FROM	TO			
Account Number			Total Hours:		Rate:	Total Earnings:	

1100-6020-1360 _____ -

Earning Code: SNC

_____ **REQUIRED SIGNATURES:**

Division Chair/Director

Date

Dean of Instruction

Date

Employee

Date