Main Office 4215 Avenue I Scottsbluff, NE 69361 (308) 635-3696 Southern Satellite 361 College Drive Sidney, NE 69162 (308) 254-4677 Northern Satellite CSC-Burkhiser Complex 1000 Main Street Chadron, NE 69337 (308) 432-6495 Harms Center WNCC 2620 College Park Scottsbluff, NE 69361 (308) 635-0206

Educational Service Unit #13

Submitted by: _____

Position or Kind of Work:



BA6

CERTIFICATED EMPLOYEE MONTHLY WORK REPORT FORM

Month: _____

	Time		Total Hours		Т	ime	Total Hours
Date	Started	Ended	Worked	Date	Started	Ended	Worked

	Total Hours for Month(s):
	Rate of Pay:
	TOTAL AMOUNT DUE:
G: 4 G 1 :44	
Signature of person submitting report:	
Signature of Supervisor:	
Approved for payment out of	fund.
By: Title:	