

IMPERIAL COMMUNITY COLLEGE DISTRICT  
TIME RECORD FOR ADJUNCT/PART-TIME FACULTY

**NAME** \_\_\_\_\_ **G#** \_\_\_\_\_

**PAY PERIOD** \_\_\_\_\_ **16, 20** \_\_\_\_\_ **TO** \_\_\_\_\_ **15, 20** \_\_\_\_\_

This Time Record is to be completed by the **5th day of each month** by every Adjunct/Part-Time employee rendering service during the pay period and it will become part of the permanent records of the College. The completed form is required by the District to support the issuance of all salary warrants for services rendered. Failure to submit a time sheet by the 5th could delay your pay warrant.

**SICK LEAVE - Pursuant to Board Policy Section 13468, Adjunct/Part-Time Instructors shall be granted one day (up to three lecture hours) sick leave per semester.**

Please record in the column the number of "hours" of lecture and number of hours of laboratory for that day.

**SECTION I**

Date	Lec	Lab	
16			
17			
18			
19			
20			
21			
22			
23			
24			
25			
26			
27			
28			
29			
30			
31			
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			

**SECTION II**

**Please complete totals for the pay period:**

- 1.Total hours sick leave..... \_\_\_\_\_
- 2.Total lecture hours worked..... \_\_\_\_\_
- 3.Total laboratory hours worked ..... \_\_\_\_\_

**SECTION III**

I certify that the information recorded is correct:

\_\_\_\_\_  
Signature of Instructor/Counselor \_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Project Director/Supervisor \_\_\_\_\_  
Date

**Approved and recorded:**

\_\_\_\_\_  
Signature of Vice President/Dean of External Campus \_\_\_\_\_  
Date

**SECTION IV**

**FOR DIFFERENT  
PLEASE SHOW THE  
HOURS TAUGHT FOR  
EACH COURSE.**

ACCT. CODE(S)	# OF HRS	RATE	TOTAL
1. _____ - _____ - _____	X		\$ _____
2. _____ - _____ - _____	X		\$ _____
3. _____ - _____ - _____	X		\$ _____