

# Teachers Report of Homebound Instruction Level 2 (Homebound Teacher Assigned) Exempt Employees Only

Instructor  
Name \_\_\_\_\_

Student  
Served \_\_\_\_\_

Week 1		Dates:		-										Total Hours
Monday		Tuesday		Wednesday		Thursday		Friday		Saturday		Sunday		
In	Out	In	Out	In	Out	In	Out	In	Out	In	Out	In	Out	
hr(s)		hr(s)		hr(s)		hr(s)		hr(s)		hr(s)		hr(s)		

Week 2		Dates:		-										Total Hours
Monday		Tuesday		Wednesday		Thursday		Friday		Saturday		Sunday		
In	Out	In	Out	In	Out	In	Out	In	Out	In	Out	In	Out	
hr(s)		hr(s)		hr(s)		hr(s)		hr(s)		hr(s)		hr(s)		

Week 3		Dates:		-										Total Hours
Monday		Tuesday		Wednesday		Thursday		Friday		Saturday		Sunday		
In	Out	In	Out	In	Out	In	Out	In	Out	In	Out	In	Out	
hr(s)		hr(s)		hr(s)		hr(s)		hr(s)		hr(s)		hr(s)		

Week 4		Dates:		-										Total Hours
Monday		Tuesday		Wednesday		Thursday		Friday		Saturday		Sunday		
In	Out	In	Out	In	Out	In	Out	In	Out	In	Out	In	Out	
hr(s)		hr(s)		hr(s)		hr(s)		hr(s)		hr(s)		hr(s)		

Week 5		Dates:		-										Total Hours
Monday		Tuesday		Wednesday		Thursday		Friday		Saturday		Sunday		
In	Out	In	Out	In	Out	In	Out	In	Out	In	Out	In	Out	
hr(s)		hr(s)		hr(s)		hr(s)		hr(s)		hr(s)		hr(s)		

$$\frac{\text{Total Hours}}{\text{(Total Hours)}} \times \$25.00 = \text{Gross Pay}$$

**DEADLINE DATE: 10<sup>th</sup> of each month**

Due to audit stipulations, there will be no payment for forms received after July 10 for the prior school year.

**Time should be submitted in 15 minute increments.**

Acct# \_\_\_\_\_

Instructor's Signature \_\_\_\_\_

Employee ID# \_\_\_\_\_

Parent Signature \_\_\_\_\_

Principal Signature \_\_\_\_\_

Asst. Superintendent or Designee \_\_\_\_\_

Date \_\_\_\_\_