

Online Timesheet Instruction

1. Access a timesheet

The link to timesheet is located on the Twin Rivers Staff Room Website under Online Resources>Forms for Employees> Nutrition Services>Timesheet-Nutrition Services

2. Enter your Name and Email

Payroll - Nutrition Services Timesheet

YOUR FULL NAME / SU NOMBRE COMPLETO
YourFirst Name YourLastName

YOUR EMAIL / SU CORREO ELECTRÓNICO
youremail@twinriversusd.org

Enter to receive confirmation of submission.

Go to form / Ir al formulario

3. Fill out all required fields

Please see instructions at the bottom of the timesheet, there are important steps to follow

- **Step one**

Select from drop down the purpose for the timesheet

OT / EXTRA DUTY / OUT OF CLASS / OR SUBSTITUTE

PAY PERIOD: Select... / 16th /

Accounting Use)

- OT
- Select...
- Extra Duty
- OT
- Out of Class
- Substitute
- Extra Duty-Summer
- Student

- **Step two through five**

Enter your name as it appears on your paycheck, no nicknames

Enter your EIN (Employee Identification Number)

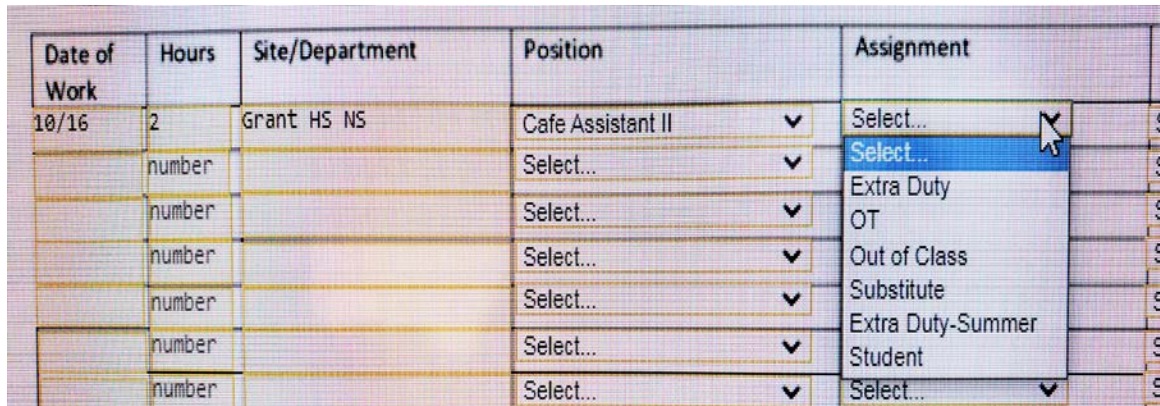
Enter each date worked, and hours, from drop down menu select your **position**

Date of Work	Hours	Site/Department	Position	A
10/16	2	Grant HS NS	Select...	S
	number		Select...	S
	number		Cafe Assistant I	S
	number		Cafe Assistant II	S
	number		Cafe Specialist	S
	number		Cafe Serv. Team Leader I	S
	number		Cafe Serv. Team Leader II	S
	number		Driver	S
	number		NS Winona Clerical - Other	S
	number		Select...	S
	number		Select...	S

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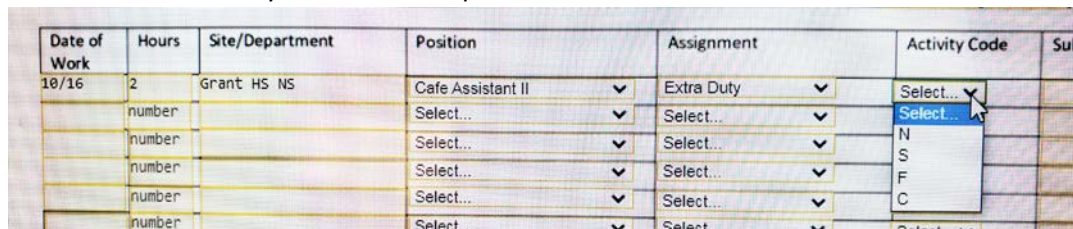
- **Step six through eight**

From drop down menu select Assignment that you worked on (**why** you need to be paid extra)



Date of Work	Hours	Site/Department	Position	Assignment
10/16	2	Grant HS NS	Cafe Assistant II	Select...
	number		Select...	Select...
	number		Select...	Extra Duty
	number		Select...	OT
	number		Select...	Out of Class
	number		Select...	Substitute
	number		Select...	Extra Duty-Summer
	number		Select...	Student
	number		Select...	Select...

Select the Activity Code from Drop Down menu:



Date of Work	Hours	Site/Department	Position	Assignment	Activity Code	Sut
10/16	2	Grant HS NS	Cafe Assistant II	Extra Duty	Select...	
	number		Select...	Select...	Select...	
	number		Select...	Select...	N	
	number		Select...	Select...	S	
	number		Select...	Select...	F	
	number		Select...	Select...	C	
	number		Select...	Select...	Select...	

N-National School Breakfast and Lunch

S-Supper

F-Fresh Fruit and Vegetable

C-Non Program Food

If you subbed for someone or had to work out of class because someone was absent in the section **Subbed for** enter the *person's name*

The form calculates Total Hours for you

Click in the box **Click to Sign Here**, you can type your name or draw with the mouse

Click on the red **Submit Form**

- **To make sure your form gets to the right person**

Select Accounting Technician Veronika.Poloprutska@twinriversusd.org

Click "Send to this recipient" and you are Done

If you are not ready to submit, want to do daily entry for your timesheet

Click on SAVE PROGRESS, you will receive an email with the link to your form so that you can edit and submit at a later day

You will receive a link to your email with a copy of your timesheet once you submit it and you will also receive an email once the form has finished going through the approval rout and is complete

Online Timesheet Instruction

Not ready to send? Click Save Progress

OT / EXTRA DUTY / OUT OF CLASS / OR SUBSTITUTE: Extra Duty

NAME: John Smith PAY PERIOD: Oct / 16th / 2021 to Nov / 15th / 2021

EIN: 555555

*Activity codes on 2nd pg

Budget Code: FD-RES-YR-OB-SITE-GOAL-FUNC-LO1-LO2 (NS Accounting Use)	# Hours			Payroll Use Only	
	Extra Hours	OT	Out of Class	Rate	\$
13 0 0000 3700 000					
13 0 0000 3700 000					
13 0 0000 3700 000					
13 0 0000 3700 000					

Date of Work	Hours	Site/Department	Position	Assignment	Activity Code	Subbed For:	Supervisor's Approval
10/16	2	Grant 1G 1G	Cofe Assistent II	Extra Duty	N	extra support	
	number		Select...	Select...	Select...		
	number		Select...	Select...	Select...		
	number		Select...	Select...	Select...		
	number		Select...	Select...	Select...		
	number		Select...	Select...	Select...		
	number		Select...	Select...	Select...		
	number		Select...	Select...	Select...		
	number		Select...	Select...	Select...		
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	number		Select...	Select...	Select...		
	number		Select...	Select...	Select...		
	number		Select...	Select...	Select...		
	number		Select...	Select...	Select...		
TOTAL	2.00						

Signature: John Smith Date: 09/16/2021 Supervisor Initials: _____

I hereby certify that I have performed the duties as reported herein. Director Signature: _____ Date: _____

Please see instructions on back. notes: _____

Submit form / Enviar formulario

Steps:

- Select type of Timesheet
- Name
- Pay Period (Oct.16 through Nov.15), (Nov.16 through Dec.15), (Dec.16 through Jan.15) etc.
- EIN
- Date
- **Hours**
- Site
- Position (your current position in the District)
- Assignment (why you needed to work and now submitting timesheet)
- Activity Code
- Subbed For (if you worked for someone or open/vacant)
- Sign
- Submit Form or (at the top "Save Progress")