

Name: _____
 Employee ID#: _____
 Job Title: _____
 Location Name and #: _____
 Work Telephone: _____

2008-2009 SCHOOL YEAR CALENDAR

Highlighted = Contract Days (A)

Highlighted = Contract Days (B)

P = Prep Days

H = Mandated Holiday

Please indicate your job share schedule by circling A or B

Calendar MUST be submitted prior to salary being paid

Year-Round Year Job Share
80/20 Split, 20% Working Mondays (184 Days Total)

80% Partner (A) 20% Partner (B)

	M	T	W	Th	F	M	T	W	Th	F	M	T	W	Th	F	M	T	W	Th	F	M	T	W	Th	F	TOTALS		TOTALS	
JULY		1 A	2 A	3 A	H/4	7 B	8 A	9 A	10 A	11 A	14 B	15 A	16 A	17 A	18 A	21 B	22	23	24	25	28	29	30	31		Jul	11	Jul	3
AUGUST					1	4	5	6	7	8	11	12	13	14	15	18	19	20	21	22	25	26	P/27 A	P/28 A	P/29 A	Aug	3	Aug	0
SEPTEMBER	H/1	2 A	3 A	4 A	5 A	8 B	9 A	10 A	11 A	12 A	15 B	16 A	17 A	18 A	19 A	22 B	23 A	24 A	25 A	26 A	29 B	30 A				Sep	17	Sep	4
OCTOBER			1 A	2 A	3 A	6 B	7 A	8 A	9 A	10 A	13 B	14 A	15 A	16 A	17 A	20 B	21 A	22 A	23 A	24 A	27 B	28 A	29 A	30 A	31 A	Oct	19	Oct	4
NOVEMBER	3 B	4 A	5 A	6 A	7 A	10 B	H/11	12 A	13 A	14 A	17 B	18 A	19 A	20 A	21 A	24	25	26	H/27	H/28						Nov	11	Nov	3
DECEMBER	1 B	2 A	3 A	4 A	5 A	8 B	9 A	10 A	11 A	12 A	15 B	16 A	17 A	18 A	19 A	22	23	H/24	H/25	26	29	30	H/31			Dec	12	Dec	3
JANUARY				H/1	2	5	6	7	8	9	12	13	14	15	16	H/19	20 B	21 A	22 A	23 A	26 B	27 A	28 A	29 A	30 A	Jan	7	Jan	2
FEBRUARY	2 B	3 A	4 A	5 A	6 A	H/9	10 B	11 A	12 A	13 A	H/16	17 B	18 A	19 A	20 A	23 B	24 A	25 A	26 A	27 A						Feb	14	Feb	4
MARCH	2 B	3 A	4 A	5 A	6 A	9 B	10 A	11 A	12 A	13 A	16 B	17 A	18 A	19 A	20 A	23 B	24 A	25 A	26 A	27 A	30 B	31 A				Mar	17	Mar	5
APRIL			1 A	2 A	3 A	6	7	8	9	10	13	14	15	16	17	20	21	22	23	24	27	28	29	30		Apr	3	Apr	0
MAY					P/1 A	4 B	5 A	6 A	7 A	8 A	11 B	12 A	13 A	14 A	15 A	18 B	19 A	20 A	21 A	22 A	H/25	26 B	27 A	28 A	29 A	May	16	May	4
JUNE	1 B	2 A	3 A	4 A	5 A	8 B	9 A	10 A	11 A	12 A	15 B	16 A	17 A	18 A	19 A	22 B	23 A	24 A	25 A	26 A	29 B	30 A				Jun	17	Jun	5
Total																										147	Total	37	

(Employee Signature) _____

(Date) _____

Job Share Partner's Name

PAYROLL USE ONLY

Input Date:

Input By:

Pay Group: C12

(Principal/Department Head Signature) _____

(Date) _____

I have discussed this work schedule with the employee and am approving it in order to meet program requirements.