

Monthly Work Report

Employees drawing Teacher Retirement

Name: _____

Empl ID#: _____

Mnth/Yr: _____

Date	Description Job #1	Hours Worked Job #1	Description Job #2	Hours Worked Job #2	Total Hours Worked for the Day
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					
21					
22					
23					
24					
25					
26					
27					
28					
29					
30					
31					

I certify that this is an accurate record of my time worked.

Signature _____

Date _____

**Total
Hours =** _____

**Total
Days =** _____

INSTRUCTIONS:

This report must be filled out **every month** by **every retiree** (except full time employees) that work for the district.

You must report **ALL** hours worked that are paid through BISD payroll.

You must send your report to the payroll office, **no later than the first business day of each month**, following the month that is being reported. You can email your report to: **payroll2@birdvilleschools.net** or bring it to the payroll office.

NOTE:
*This form is only for reporting hours and days worked to TRS. This is **NOT** how you submit your time to be paid.*