

### Non-Timetabled Hours Form

<b>Employee name (print):</b>	
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**Month (please tick):**

January	February	March	April	May	June

July	August	September	October	November	December

**Additional hours worked (please use decimal numbers):**

Day	Substitution	Supervision	Garderie	Lunch Supervision	Extra-curricular	Observations
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						
<b>Total</b>						

**Signed (employee):**

**Date:**

**For Office Use**

<b>To be completed by relevant authority</b>	
<b>Reasons for additional hours (if replacing other staff please note name):</b>	
<b>Signed:</b>	
<b>Date:</b>	

<b>LFI Relevant authorities</b>	
Primary School: garderie/lunch supervision/extra-curricular	Extra-curricular Co-ordinator
Primary School: all other	Primary School Head
Secondary School: supervision/substitution	CPE
Secondary School: all other	Principal

<b>To be completed by LFI Management Accountant</b>	
<b>Allocated to payroll (date):</b>	
<b>Signed:</b>	
<b>Date:</b>	