

CRD Time Sheet - Weekly

Employee Name: _____ Signature: _____

Function	Start time	End time	Break	Sunday	Monday	Tuesday	Wed.	Thursday	Friday	Saturday	Total Hours
Staff Training											
Office											
Office											
TL											
TL											
Instructor/Priv											
Lifeguard											
Rental Inst/Guard											
Aquafit											
Instructor/Priv											
Lifeguard											
Rental Inst/Guard											
Aquafit											
Instructor/Priv											
Lifeguard											
Rental Inst/Guard							Do Not Write				
Aquafit											
Instructor/Priv											
Lifeguard											
Rental Inst/Guard											
Aquafit											
Instructor/Priv											
Lifeguard											
Rental Inst/Guard				Do Not Write							
Aquafit											
Instructor/Priv											
Lifeguard											
Rental Inst/Guard											
Aquafit											
Instructor/Priv											
Lifeguard											
Rental Inst/Guard											
Aquafit											

Employee Name: _____ Signature: _____

Notes:

