## Fort McMurray Public Schools

## \*\*Sample\*\*

## **ATA**

## Regular Employee Acting Admin/Night School/Summer School

Name:	Name: Your name			School: Your school				Pay period dates
				-	•			(From- To)
Date Month/Day	Day							
			Acting Admin	Night School	Summer School	Other	Reason	Admin Approval
Date	Monday		1				Acting admin for 'name of school'	Admin signature
Date	Tuesday			0.5			Night school for 'name of school'	Admin signature
	Wednesday							
	Thursday							
	Friday							
	Sat/Sun							
	Monday							
	Tuesday							
	Wednesday							
	Thursday							
	Friday							
	Sat/Sun							
	Monday							
	Tuesday							
	Wednesday							
	Thursday							
	Friday							
	Sat/Sun							
	Monday							
	Tuesday							
	Wednesday							
	Thursday							
	Friday							
	Sat/Sun							
Total Hours								

Your signature

Employee's signature

Date

Date