

Tutoring time record



SAINT COLUMBKILLE
PARTNERSHIP SCHOOL

Employee Name: _____

Week ending on Friday:

Day	Date	Tutoring Hours	Student (s) Tutored (First and Last Name)
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			
Sat			
Sun			
	Total hours per week		

Week ending on Friday:

Day	Date	Tutoring Hours	Student (s) Tutored (First and Last Name)
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			
Sat			
Sun			
	Total hours per week		
	Total Hours for 2 weeks		

Employee signature

Date

Manager signature

Date