



Temporary Assignment Online Time Information Form

In order for employees to successfully use the online time application to enter time for temporary assignments, program managers or their designees **must** provide information pertinent to the employee. Please complete all fields below and provide the documentation to the employee for their time entry use. A copy of this form must be maintained at the work location with the time and attendance records for the duration of the work assignment plus an additional five years.

Temporary employees fall into three broad categories:

1. Active employees who work an extra assignment.
2. Employees who do not hold a “contracted” position with FCPS; the only position they have is as a temporary, hourly employee.
3. Less-than-full-time active employees who work the remainder of their workday as temporary hourly employees at the same work location and perform similar duties as in their regular assignment.

Section I – Employee Information

Employee Name _____ Employee Number _____

Effective Date _____ Description of Work _____

Section II – Position Code

Please fill in the temporary assignment in which the employee has been hired to work.

Position	Position Description	Time Code

Other (Please Specify) _____

Shift Differential Pay

*If the temporary custodian is authorized to receive shift differential pay, please check the shift differential pay time code.

Shift Differential/Evening Shift (S5) Shift Differential/Night Shift (S6)

Section III – Index-Subobject Code

Please fill in the index code and valid subobject code in which the employee will be paid from:

Index Code: _____ Subobject Code: _____

Subobject Code	Subobject Code Description	Subobject Code	Subobject Code Description
2000	Hourly Teacher	2007	Hourly Dining Room Assistant
2001	Hourly Technical	2008	Hourly Administration
2002	Hourly Office Personnel	2009	Hourly Trades
2003	Hourly Custodian	2011	Hourly Family Liaisons
2004	Hourly Food Service Worker	2013	Hourly After School Programs
2005	Hourly Instructional Assistant	2015	Hourly School Based Administrators
	Hourly (Please Specify)		

Section IV – Approving Supervisor

Please indicate the appropriate supervisor in the “Work Performed For” in which the time should be routed to for supervisor approval.

Work Performed For _____ (e.g. Jane Supervisor)