## Coaching Reconciliation Sheet (Citizen Coach and Certificated Staff) Aberdeen School District No. 5

Employee Name:		Account #: 0125 - 28 - 3020		
YEAR	Activity or Sport:	School:		
I certify that I wo	rked the hours recorded below:			

Employee Signature			Date	Supervisor
Month	Day	Coaching	Number of	NOTES
		Hours	Hours over 8	
Example	0	2.0	0	
	1			
	2			
	3			
	4			
	5			
	6			
	7			
	8			
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	26			
	27			
	28			
	29			
	30			
	31			

TOTAL:

NOTE: Reportable hours include up to ½ hour after each practice, game, or activity session