



## Bemidji Regional Interdistrict Council

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# BRIC TIME SHEET

Name: \_\_\_\_\_

School: \_\_\_\_\_

If schedule varies from above, the reason must be noted in the “Notes:” box.

Any permanent changes must be pre-approved by both your Supervising Teacher and BRIC Supervisor.

Date	MON	TUES	WED	THURS	FRI	TOTAL HOURS	Notes:
Date							
AM Time							
PM Time							
Classroom Hours							
Transportation Hours							

Date	MON	TUES	WED	THURS	FRI	TOTAL HOURS	Notes:
Date							
AM Time							
PM Time							
Classroom Hours							
Transportation Hours							

Date	MON	TUES	WED	THURS	FRI	TOTAL HOURS	Notes:
Date							
AM Time							
PM Time							
Classroom Hours							
Transportation Hours							

Leave Codes: “S” – Sick; “P” – Personal; “H” – Holiday; “B” – Bereavement; “N” – No School

**TOTAL HOURS WORKED:** \_\_\_\_\_

\_\_\_\_\_  
Paraprofessional Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Supervising Teacher’s Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
BRIC Supervisor Signature