Instructions for filling out and submitting electronic timecards

ELECTRONIC TIME CARD LINK

Electronic time cards must be submitted <u>MONTHLY</u>. Please submit time for IEP meetings held in the same month on the same electronic time card.

<u>SECONDARY</u>: Time cards submitted for block/period SUBBING should be submitted on a separate time card from IEP meetings.

When you click on the electronic time card link, you will be directed to the form below. Fill out your *full legal name* and *district email*. Select **'Go to form'**

Fill in your *ID, LEGAL Last/First name* (Do not put any nicknames or middle names you go by), **Select the Site/Department** where the work completed was done from the drop down menu. Don't put where you normally work if different, put where the work was completed.

West Contra Costa Unified School District
Special Education Dept. Online Timecard

ID#	Last Name	First Name	Select... ▾ Site/Dept Worked

Click on the select button (red circle below) to choose Hour, Day, Period, or Block.

Click the date box (red box/arrow below) and either type the date or choose on the calendar that pops up.

Click the number box (blue box/arrow) and put in how many units you chose.

Please refer to the units (green box below) for hour to unit conversion. For example, if you worked 1 hour and 30 minutes, you will select hours and type in **1.5** for time worked. No need to leave any blanks to match any calendar.

NOTE: Please use one timecard for each job worked.
NOTE: If stepping up, only include the time working out of class.
NOTE: You must enter your time in the following increments as an example:

1.0 (hour)	.25 (15 minutes)	.50 (30 minutes)	.75 (45 minutes)

WEEK 1		WEEK 2		WEEK 3		WEEK 4		WEEK 5	
Date	Time worked	Date	Time worked	Date	Time worked	Date	Time worked	Date	Time worked
Indicate amount of time worked: IN DAYS, HOUR or PERIOD & STIPEND in time worked column:							Select... ▾		
mm/dd/yyyy	number	mm/dd/yyyy	number	mm/dd/yyyy	number	mm/dd/yyyy	number	mm/dd/yyyy	number
mm/dd/yyyy	number	mm/dd/yyyy	number	mm/dd/yyyy	number	mm/dd/yyyy	number	mm/dd/yyyy	number
mm/dd/yyyy	number	mm/dd/yyyy	number	mm/dd/yyyy	number	mm/dd/yyyy	number	mm/dd/yyyy	number
mm/dd/yyyy	number	mm/dd/yyyy	number	mm/dd/yyyy	number	mm/dd/yyyy	number	mm/dd/yyyy	number
mm/dd/yyyy	number	mm/dd/yyyy	number	mm/dd/yyyy	number	mm/dd/yyyy	number	mm/dd/yyyy	number
mm/dd/yyyy	number	mm/dd/yyyy	number	mm/dd/yyyy	number	mm/dd/yyyy	number	mm/dd/yyyy	number

Click the dropdown under **'Are You Stepping Up'**, select yes or no.

Click the dropdown under **'Job Title'** to choose your Job Title. If you are a special education teacher your job title will be either ESN teacher, MMSN teacher, RSP teacher, etc.

Type the person replaced if you are substituting for a particular person.

POSITION INFORMATION		
CLASSIFIED -ARE YOU STEPPING UP?	JOB TITLE	PERSON REPLACED
Select... ⌄	Select... ⌄	

Skip both the GL and the PCN or Allocation code.
The reviewer will input the appropriate codes.

NOTE: You must provide a valid GL account code, allocation code or PCN number. It will be returned, and maybe delayed, if it is not correct.

GL ACCOUNT: XX-XXXX-XXXX-XXX-XXXX-XXXX-XXXXXX-X-XXXX   **PCN/Allocation Code:**
ENTER HERE: [   ]   ENTER HERE: [   ]

REQUIRED: **State in the comments what the time submitted is for**. For example, 'IEPs for students AF and JD' (using student initials, no full names)

Do not put full student name due to confidentiality, **student initials only**.

COMMENTS:
[   ]

Click on **'Click to sign here'** to add your signature to your time card.

Type your name in for employee signature. When complete, click blue box **'Add signature'** to add signature.

Add any attachments needed for record keeping.

If you are submitting for IEPs <u>ONLY</u> the Notice of Meeting must be attached.

DO NOT ATTACH THE STUDENT'S FULL IEP OR OTHER DOCUMENTS.

Attachments:

Add Attachment

Submit your attachment by clicking the 'Submit form' box.

Submit form / Enviar formulario

Next to **'Account Code Review'** click the **'Select recipient'** box to send your time card to the appropriate account code reviewer. For reference, below is the list you will select from.

Colleen Cowles (**Transition**)
Cristina Ponce (**Cameron**)
Judith Gerloff (**Speech, Nurse, LVN, Health Aide**)
Maggie Huang (**CFY Supervision**)
Meuy Saechao (**Central - OT, APE, WATR**)
Perla Ponce (**Elementary, SPED Translators**)
Rosalina Hage (**Secondary, SPED PD/Training**)
Valerie Griffin (**Psych, VI, DHH, 504**)

Your time card is now submitted.
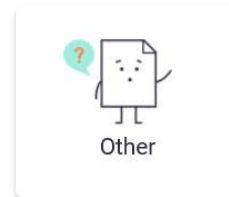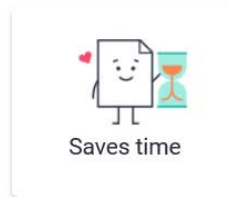
Thank you for submitting your form!

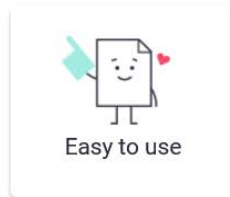📄 Fill out another copy   ⬇ View/Print PDF   👁 See my completed form

What do you think about this e-form?
Select all that apply

Easy to use

Environmentally friendly

Saves time

Other

Suggestion box
Feedback will be shared with the district. Do not include time sensitive questions.

Send suggestion