

Name: _____
 Employee ID#: _____
 Job Title: _____
 Location Name/Loc #: _____
 Work Telephone: _____

2019-2020 SCHOOL YEAR CALENDAR

Highlighted = Contract Days (A) **Highlighted = Contract Days (B)**
P = Prep Days **H = Mandated Holiday**

Please indicate your job share schedule by circling A or B

Calendar MUST be submitted prior to salary being paid

Year-Round School Year Job Share
60/40 Split, 60% Working Wednesdays/Thursdays/Fridays (184 Days Total)

	60%	40%
	Partner (A)	Partner (B)
	TOTALS	TOTALS
Jul	8	6
Aug	4	4
Sep	12	8
Oct	14	9
Nov	10	5
Dec	9	6
Jan	3	2
Feb	11	7
Mar	12	8
Apr	3	2
May	12	7
Jun	12	10
Total	110	74

	M	T	W	Th	F	M	T	W	Th	F	M	T	W	Th	F	M	T	W	Th	F	M	T	W	Th	F
JULY	1 B	2 B	3 A	H/4	5 A	8 B	9 B	10 A	11 A	12 A	15 B	16 B	17 A	18 A	19 A	22	23	24	25	26	29	30	31		
AUGUST				1	2	5	6	7	8	9	12	13	14	15	16	19	20	P/21 B	P/22 B	P/23 A	26 B	27 B	28 A	29 A	30 A
SEPTEMBER	H/2	3 B	4 A	5 A	6 A	9 B	10 B	11 A	12 A	13 A	16 B	17 B	18 A	19 A	20 A	23 B	24 B	25 A	26 A	27 A	30 B				
OCTOBER		1 B	2 A	3 A	4 A	7 B	8 B	9 A	10 A	11 A	14 B	15 B	16 A	17 A	18 A	21 B	22 B	23 A	24 A	25 A	28 B	29 B	30 A	31 A	
NOVEMBER					1 A	4 B	5 B	6 A	7 A	8 A	H/11	12 B	13 A	14 A	15 A	18 B	19 B	20 A	21 A	22 A	25	26	27	H/28	H/29
DECEMBER	2 B	3 B	4 A	5 A	6 A	9 B	10 B	11 A	12 A	13 A	16 B	17 B	18 A	19 A	20 A	23	H/24	H/25	26	27	30	H/31			
JANUARY			H/1	2	3	6	7	8	9	10	13	14	15	16	17	H/20	21	22	23	24	27 B	28 B	29 A	30 A	31 A
FEBRUARY	3 B	4 B	5 A	6 A	7 A	10 B	11 B	12 A	13 A	H/14	H/17	18 B	19 A	20 A	21 A	24 B	25 B	26 A	27 A	28 A					
MARCH	2 B	3 B	4 A	5 A	6 A	9 B	10 B	11 A	12 A	13 A	16 B	17 B	18 A	19 A	20 A	23 B	24 B	25 A	26 A	27 A	30	31			
APRIL			1	2	3	6	7	8	9	10	13	14	15	16	17	20	21	22	23	P/24 A	27 B	28 B	29 A	30 A	
MAY					1 A	4 B	5 B	6 A	7 A	8 A	11 B	12 B	13 A	14 A	15 A	18 B	19 B	20 A	21 A	22	H/25	26 B	27 A	28 A	29 A
JUNE	1 B	2 B	3 A	4 A	5 A	8 B	9 B	10 A	11 A	12 A	15 B	16 B	17 A	18 A	19 A	22 B	23 B	24 A	25 A	26 A	29 B	30 B			

 (Employee Signature) (Date)

 (Principal/Department Head Signature) (Date)

Please Print Job Share Partner's Name

PAYROLL USE ONLY

Input Date: _____

Input By: _____

I have discussed this work schedule with the employee and am approving it in order to meet program requirements.

