DEPARTMENT OF PERFORMING AND VISUAL ARTS
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MASTERCLASS PAYROLL FORM
2021-2022

****MASTER CLASS TIME SHEETS MUST BE *COMPLETELY FILLED OUT* AND TURNED IN WEEKLY TO YOUR PROGRAM'S DIRECTOR**

Music Tutor Name: _____ Employee ID (*NOT* SSN): _____

Campus: _____ Circle Group: Band / Choir / Other_____

Week of: ___/___/___-___/___/___

Date	Time In	Time Out	Hours	Section Tutored/Service Provided	# of Students in attendance
Sample 1:	7:45a	3:45p	8	Flutes	10
Sample 2:	12:00p	3:00p	3	Accompaniment	JV Choir
SUNDAY					
MONDAY					
TUESDAY					
WEDNESDAY					
THURSDAY					
FRIDAY					
SATURDAY					

Total Hours Worked: _____ X $_____ = $_____

HOURS RATE TOTAL PAYMENT

_____ _____ _____ _____

Music Tutor Signature **Date** **Director/Supervisor Signature** **Date**

_____ _____ **PVA use only:** _____

PVA Director Signature **Date** **Budget Code**

(Only required for rates over $50)