

M

MANHATTAN YOUTH BALLET

YB

PAYROLL FORM

NAME: _____

POSITION: _____

WEEK 1					
PAY PERIOD					
FROM: _____		TO: _____			
Day of the week	Date	Hours: Start Time - End Time	Number of Classes		Rehearsal Hours
MONDAY					
TUESDAY					
WEDNESDAY					
THURSDAY					
FRIDAY					
SATURDAY					
SUNDAY					
TOTAL NUMBER OF HOURS FOR WEEK 1:				TOT# OF HRS:	
WEEK 2					
PAY PERIOD					
FROM: _____		TO: _____			
Day of the week	Date	Hours: Start Time - End Time	Number of Classes		Rehearsal Hours
MONDAY					
TUESDAY					
WEDNESDAY					
THURSDAY					
FRIDAY					
SATURDAY					
SUNDAY					
TOTAL NUMBER OF HOURS FOR WEEK 2:				TOT# OF HRS:	
COMMENTS: _____				TOTAL: \$ _____	

