FORM 102-3 MONTHLY CUSTODIAL SIGN-IN/OUT SHEET

Name _____   **School** _____

For Month of: _____   **of 20** ____

Date	Start Time	End Time	Start Time	End Time	Total Hrs.	Custodian Initial
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						
17						
18						
19						
20						
21						
22						
23						
24						
25						
26						
27						
28						
29						
30						
31						

Note: To be completed and sent to the Maintenance Dept. at the end of every month.

Custodian Signature   **Administrator Signature**