

Time Distribution Report

Employee Name	Position	Normal Work Hours	Month/Year
---------------	----------	-------------------	------------

Day	WORK HOURS		FOOD SERVICE ADMINISTRATION TASKS			FOOD SERVICE OPERATIONS TASKS					I. Non Food Service **	J. Total Hours
	Start	End	A. Managing **	B. Planning **	C. Organizing **	D. Menu Planning **	E. Meal Prep/Serve **	F. Meal Clean-Up **	G. Supervise Meal **	H. Meal Records **		
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												
Monthly Totals **												

**** Recorded in Hours**

Total Food Service hours _____ + Total Non Food Service hours _____ = Total Hours Worked = _____

% of Hours Worked in Food Service duties:

My workdays are _____ to _____. My work hours are _____ am to _____ pm. I did not work outside the hours of my fixed schedule, and all my work hours were spent performing Food Service duties.

I certify that all information is true and correct.

Signature - Employee

Date

Approval:	
_____ Signature - Supervisor	_____ Date