



Hoopaa Career & Technical Education Program (HCATEP)
Stipend & Mileage Reimbursement Timesheet Schedule

P.O. Box 529 • 65 Orchard Street
Hoopaa, California 95546
Telephone: (530) 625-4821 • Fax: (530) 625-4895



SPRING SEMESTER 2021			
Pay Period	Start Date	End Date	Stipend Pay Date
1	16-Jan	22-Jan	5-Feb
2	23-Jan	5-Feb	19-Feb
3	6-Feb	19-Feb	5-Mar
4	20-Feb	5-Mar	19-Mar
5	6-Mar	19-Mar	2-Apr
6	20-Mar	2-Apr	16-Apr
7	3-Apr	16-Apr	30-Apr
8	17-Apr	30-Apr	14-May
9	1-May	14-May	28-May

■ Stipend checks will be mailed directly to students by the above mentioned dates. However, delays may occur due to unforeseen circumstances.

Hoopa Career And Technical Education Program (HCATEP) Attendance Verification Form



TERM: _____

Student Name: _____

Payment #: _____

Please have your Instructor(s) verify your attendance for each class session by signing next to the corresponding date. You may write the time in and out or the instructor can enter this information. Instructors should not verify class sessions for dates you were absent. Thank you in advance for your time and assistance.

MY CLASS:					MY CLASS:					MY CLASS:				
DATE OF ATTENDANCE	Time In	Time Out	Comment	Instructor Signature	DATE OF ATTENDANCE	Time In	Time Out	Comment	Instructor Signature	DATE OF ATTENDANCE	Time In	Time Out	Comment	Instructor Signature

MY CLASS:					MY CLASS:					MY CLASS:				
DATE OF ATTENDANCE	Time In	Time Out	Comment	Instructor Signature	DATE OF ATTENDANCE	Time In	Time Out	Comment	Instructor Signature	DATE OF ATTENDANCE	Time In	Time Out	Comment	Instructor Signature

I hereby certify that all information reported on this form is true, complete, and accurate. False statements or misrepresentation will be cause for denial, withdrawal and/or repayment of services and benefits paid by HCATEP. Furthermore, I give HCATEP my permission to verify my attendance for any of the classes that I am enrolled.

Student Signature: _____

Date: _____