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COLLEGE WORK-STUDY PROGRAM
TIMESHEET

MONTH _____ YEAR _____

LAST NAME _____ FIRST NAME _____ MI _____ EMPLOYEE ID NO _____

DEPARTMENT _____ HOURLY RATE 7.25

WEEK		NUMBER OF HOURS							TOTAL HOURS
		M	T	W	TH	F	S	S	
FROM	TO								0.00
FROM	TO								0.00
FROM	TO								0.00
FROM	TO								0.00
FROM	TO								0.00

Round off hours worked to the nearest quarter hour
¼ hour = .25; ½ hour = .50; ¾ hour = .75; 1 hour = 1

TOTAL 0.00

GROSS EARNINGS $ 0.00

I hereby certify that the above employee hours recorded herein are true and correct to the best of my knowledge.

FOR SUPERVISOR/STUDENT USE ONLY	HOURS AVAILABLE
Balance Previous Time Sheet	
Current Time Sheet	0.00
New Balance	0.00

SUPERVISOR'S SIGNATURE _____ PHONE # _____

DATE _____

STUDENT'S SIGNATURE _____ DATE _____

INSTRUCTIONS
Time sheets must be submitted to the Payroll Office on or before the last work day of each month and must be signed by the student. Each supervisor must also sign the student's time sheet and provide the appropriate department account number. Late time sheets, missing or incorrect signatures or missing account numbers may delay paychecks an entire month. Please fill out time sheets in black ink.

ALL COPIES TO BE SUBMITTED TO THE PAYROLL OFFICE AT THE ADMINISTRATIVE SERVICE CENTER