

STUDENT TIME SHEET

Name (printed clearly): _____

Department and/or Job Description: _____

For Month(s) of: _____ Total Hours Worked: _____

	Week 1 Dates	Week 2 Dates	Week 3 Dates	Week 4 Dates	Week 5 Dates
From (MM/DD)	/	/	/	/	/
To (MM/DD)	/	/	/	/	/

Saturday					
Sunday					
Monday					
Tuesday					
Wednesday					
Thursday					
Friday					
Week Totals					

Supervisor and Student Signatures certify that the hours listed above are accurately reported and that the student's work is satisfactorily completed.

Student Signature

Date

Supervisor Signature

Date

Supervisors, please circle appropriate Work Study Budget #.

General 250-61050-011 Library 250-61051-011 International 250-41875-011

If non-work study, enter 11-digit budget # here: _____

*****IMPORTANT NOTE FOR ALL SUPERVISORS*****
 If this is the first pay for the student for non-work study, enter the data of approval and rate of the approval by the Director of Finance and Operations and attach a copy of such approval. If no such data and rate are entered, this time sheet will be returned to the supervisor and the student's pay will be delayed. Approved rate \$_____/hour.

Please note: It is the student's responsibility to properly complete this time sheet, to acquire his/her supervisor's signature, and to submit this time sheet to the Business Office by each pay period deadline. In addition, COA cannot, by law, process a time sheet into a paycheck for any employs without having both W-4 and I-9 forms on record.