

Student Name (print clearly) \_\_\_\_\_

Department \_\_\_\_\_

For the 2 Weeks Ending (Sunday) \_\_\_\_\_

	Week 1	Week 2	
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			
Saturday			
Sunday			
Total Hours			
	week 1	week 2	Grand total

Select One

TA 100-61030-011

General Workstudy 250-61050-011

Library Workstudy 250-61051-011

International Workstudy 250-41875-011

Non-Federal Workstudy 250-61052-011

Other (11 digit budget number) \_\_\_\_\_

I certify that I have worked the hours as noted on the above days and the information recorded is correct. I also certify by signing below that any day I worked for more than 6 hours, that I "clocked out" for at least half an hour for a break before working more than 6 hours.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Manager Signature

\_\_\_\_\_  
Date

Student Name (print clearly) \_\_\_\_\_

Department \_\_\_\_\_

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Date

\_\_\_\_\_  
Manager Signature

\_\_\_\_\_  
Date