



**Timesheet Must Be Submitted Directly to Payroll
by the Department Manager or Timekeeper**

STUDENT EMPLOYEE TIMESHEET

ALL INCOMPLETE TIMESHEETS WILL BE RETURNED UNPROCESSED. A SEPARATE TIMESHEET MUST BE SUBMITTED FOR EACH DEPARTMENT AND EACH PAY PERIOD IN WHICH WORK IS PERFORMED.

CHECK THE APPROPRIATE WORK CATEGORY:

STUDENT ASSISTANT: FEDERAL WORK STUDY: SUMMER:

NAME: _____ STUDENT ID #: _____

DEPARTMENT ID: _____ OTHER DEPARTMENT(S) EMPLOYED: _____

PAY PERIOD: _____

Please write the date for each week in the box before the "hours" column below.

	WEEK 1			WEEK 2			WEEK 3			WEEK 4			WEEK 5		
	Date	Hours	Min												
Sun															
Mon															
Tue															
Wed															
Thur															
Fri															
Sat															
Weekly Totals:															

TOTAL HOURS WORKED IN PAY PERIOD: _____

I CERTIFY THAT I HAVE WORKED AS RECORDED ON THIS TIMESHEET:		I CERTIFY THAT THE HOURS SUBMITTED FOR THE PAY PERIOD ARE CORRECT:	
EMPLOYEE'S SIGNATURE _____		SUPERVISOR'S SIGNATURE _____ DATE _____	
		SUPERVISOR'S NAME (PRINTED) _____	
PAYROLL USE ONLY: Received: _____ Paid: _____		NOTES:	