

**STATE UNIVERSITY OF NEW YORK AT NEW PALTZ  
STUDENT ASSISTANT HOURLY TIME SHEET**

1. Time sheet must be completed in ink and be legible. Hours worked must be in even units of hours and quarter hours. For example: 1, 1¼, 1½, or 1¾
2. Payments can ONLY be made after a completed Student Assistant Appointment Form, current IT2104 or IT2104E form, and current I-9 are on file in Payroll.
3. You may not work more than 20 hours a week for all jobs combined while school is in session. You must take a half hour break when 6 consecutive hours have been worked.
4. Time sheets are due in Payroll by the scheduled deadline. Please refer to the *Payroll Schedule – Work Study and Student Assistant*, for deadline dates and paycheck dates.
5. Incomplete time sheets will be returned to the department and will delay payment to the student. **All fields must be completed.**

FULL NAME \_\_\_\_\_  
(PRINT CLEARLY)

LAST 4 DIGITS OF SOCIAL SECURITY # 

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ACCOUNT NUMBER \_\_\_\_\_

DEPARTMENT \_\_\_\_\_

TYPE OF WORK \_\_\_\_\_

DAY	DATE	IN	LUNCH		OUT	HOURS WORKED
			OUT	IN		
THURS						
FRI						
SAT						
SUN						
MON						
TUES						
WED						
WEEKLY TOTAL						

DAY	DATE	IN	LUNCH		OUT	HOURS WORKED
			OUT	IN		
THURS						
FRI						
SAT						
SUN						
MON						
TUES						
WED						
WEEKLY TOTAL						

"I certify that the above hours are correct."

**The time sheet must be submitted to Payroll directly from the supervisor (either in person, through campus mail, or Payroll dropbox) by the deadline date.**

STUDENT \_\_\_\_\_ DATE \_\_\_\_\_

TOTAL HOURS WORKED \_\_\_\_\_

"I hereby certify that the above is a true statement of the hours worked by the above employee and that the employee has performed his assigned duties in a satisfactory manner. I further certify that the hours worked do not exceed those authorized."

RATE OF PAY \_\_\_\_\_

AMOUNT DUE \_\_\_\_\_

AUTHORIZED SUPERVISOR \_\_\_\_\_ DATE \_\_\_\_\_

Distribution:      White - Payroll Office  
                           Yellow - Supervisor  
                           Pink - Student

SUPERVISOR – PRINTED NAME \_\_\_\_\_