

STUDENT WAGE EMPLOYMENT TIMESHEET

Students and supervisors must complete timesheet in FULL and submit it to the **Payroll Office** on the last working day of each month. All information must be original and completed in ink!!

(Created By Human Resources)

Student's Name Employee ID# Budget Code

Pay Period for this timesheet: From Through

	Sun	Mon	Tues	Wed	Thurs	Fri	Sat	Total Hrs for Week
Wk 1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Wk 2	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Wk 3	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Wk 4	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Wk 5	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Pay Rate \$ Total Hrs

Student Signature Date

I hereby certify that this timesheet is a true statement of the hours worked by the student and that the work assigned has been performed in a satisfactory manner. I understand that this student should not work over 25 hours per week.

Supervisor's Signature Date

Department Phone

