

# STUDENT TIME SHEET

## *Marquette University*

PLEASE PRINT CLEARLY!

**Last Name:** \_\_\_\_\_ **First Name:** \_\_\_\_\_ REQUIRED

**Oracle Employee ID #:** \_\_\_\_\_ **Check One:** \_\_\_\_\_ **FWS** or \_\_\_\_\_ **SWO**

**Department:** LAW SCHOOL

**Period Start and End Date** \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ **to** \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ REQUIRED

**Federal Work Study Number:** 30800-00000-6071 ☐ On Campus ☐ Community Service  
(only if FWS awarded) 30800-00000-6070 ☐ Off Campus ☐ Community Service

**Department Account Number:** \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

**Hourly Wage:** \$ \_\_\_\_\_ **Total Hours:** \_\_\_\_\_ REQUIRED

Date	Time In	Time Out	Hours Worked

**I (supervisor) acknowledge that the times recorded above are accurate and correct.**

\_\_\_\_\_/\_\_\_\_\_  
Supervisor Signature / Print Name      Date      Phone Number

**I (grant investigator) acknowledge that the account numbers are accurate and correct.**

\_\_\_\_\_/\_\_\_\_\_  
Grant Investigator Signature / Print Name      Date      Phone Number