

STUDENT TIME SHEET

To Be Completed by Student:

Name: _____ Student I.D. ____ - ____ - ____

Type of Employment Work-Study Student Employment (Dept. Funding)

Daily Work Schedule: Complete for each day worked. Mark X on days not worked. (If you leave for class and return later the same day, record additional START and STOP times.)

DAY	START	STOP	START	STOP	DAILY TOTAL
Monday					
Tuesday					
Wednesday					
Thursday					
Friday					
Saturday					
Sunday					
Total Hours Worked:					

I certify that this is an accurate record of hours worked.

Student Signature

Date

NOTE: International, Work-Study and full-time Law students are not permitted to work over 20 hours per week while classes are in session. Students are required to take an unpaid break of at least 30 minutes after working six continuous hours each day. Students are paid for hours worked only. Lunch time, breaks, sick days, holidays and snow days are not to be counted as hours worked

To Be Completed by Supervisor:

Dept. Mail Code: _____

Regular Hours to Pay: ____ . ____

Overtime Hours to Pay: + ____ . ____

Total Hours to Pay: ____ . ____

(Sum of Regular and Overtime Hours)

I certify that this student employee has worked the number of hours indicated and that the work has been performed in a satisfactory manner.

Supervisor Signature

Date

SUPERVISORS: YOU ARE REQUIRED BY LAW TO MAINTAIN THIS START/STOP TIME RECORD ON EACH HOURLY PAID EMPLOYEE.