

2015 – 2016 TIME SHEET

FULL NAME: _____ HORNET ID: _____

DEPARTMENT: _____ PAY PERIOD: 4/1/2016 – 4/15/2016

	Date:	Time				Hours Worked:	Time IN:	Time			Hours Worked:	
		IN:	OUT:	OUT:	IN:			OUT:				
		Shift One						Shift Two (if applicable)				
Sunday												
Monday												
Tuesday												
Wednesday												
Thursday												
Friday	4/1/2016											
Saturday	4/2/2016											
WEEK 1 HOURS WORKED:												

	Date:	Time				Hours Worked:	Time IN:	Time			Hours Worked:
		IN:	OUT:	OUT:	IN:			OUT:			
Sunday	4/3/2016										
Monday	4/4/2016										
Tuesday	4/5/2016										
Wednesday	4/6/2016										
Thursday	4/7/2016										
Friday	4/8/2016										
Saturday	4/9/2016										
WEEK 2 HOURS WORKED:											

	Date:	Time				Hours Worked:	Time IN:	Time			Hours Worked:
		IN:	OUT:	OUT:	IN:			OUT:			
Sunday	4/10/2016										
Monday	4/11/2016										
Tuesday	4/12/2016										
Wednesday	4/13/2016										
Thursday	4/14/2016										
Friday	4/15/2016										
Saturday											
WEEK 3 HOURS WORKED:											
TOTAL HOURS WORKED THIS PAY PERIOD:											

I hereby certify that this time sheet is a true statement of the hours worked during the identified pay period. I understand that falsifying information on this form can result in my participation eligibility being revoked for the remainder of my time at Harris-Stowe State University.

STUDENT SIGNATURE: _____ DATE: _____

SUPERVISOR SIGNATURE: _____ DATE: _____