



ANY FALSE INFORMATION PROVIDED ON THIS FORM IS A VIOLATION OF THE POLICIES AND PROCEDURES OF THE INSTITUTION AND MAY BE PUNISHED BY THE TERMINATION OF PROGRAM PARTICIPATION.

This form should be used throughout the semester for Student Workers to sign-in and sign-out of each shift. SWP Supervisors will attach a copy of this form—consisting of the dates relative to the pay period—along with the submission of their Student Worker's time sheets each pay period.

OFFICE NAME:	PAY PERIOD:

STUDENT WORKER NAME:	DATE OF SHIFT:	TIME:	Purpose:
	/	: A P	Start Break-out Break-in Finish
	/	: A P	Start Break-out Break-in Finish
	/	: A P	Start Break-out Break-in Finish
	/	: A P	Start Break-out Break-in Finish
	/	: A P	Start Break-out Break-in Finish
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	/	: A P	Start Break-out Break-in Finish
	/	: A P	Start Break-out Break-in Finish
	/	: A P	START BREAK-OUT BREAK-IN FINISH
	/	: A P	START BREAK-OUT BREAK-IN FINISH
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