Employee Name
ID\#
Job Title
Dept
Supervisor
Pay Period

- Write legibly using Black ink.
- Return your time sheet to Payroll in the Executive Bldg.
- Please round time to the nearest quarter hour.

Pay periods are the $15^{\text {th }}$ to the $14^{\text {th }}$ of each month
Pay day is the last business day of the month
$15 \mathrm{~min}=.25 ; 30 \mathrm{~min}=.50 ; 45 \mathrm{~min}=.75$

| Date | Time In | Time Out | Time In | Time Out | Worked Hours | Sick Hours | Payment Approval |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 15 |  |  |  |  |  |  |  |
| 16 |  |  |  |  |  |  | Must be complete in order to process payment. <br> Hourly Rate |
| 17 |  |  |  |  |  |  |  |
| 18 |  |  |  |  |  |  |  |
| 19 |  |  |  |  |  |  |  |
| 20 |  |  |  |  |  |  | Worked Hours |
| 21 |  |  |  |  |  |  |  |
| 22 |  |  |  |  |  |  |  |
| 23 |  |  |  |  |  |  | Sick Hours |
| 24 |  |  |  |  |  |  |  |
| 25 |  |  |  |  |  |  |  |
| 26 |  |  |  |  |  |  |  |
| 27 |  |  |  |  |  |  | Gross Pay $\quad$10-90010-5400Department Account Number |
| 28 |  |  |  |  |  |  |  |
| 29 |  |  |  |  |  |  |  |
| 30 |  |  |  |  |  |  |  |
| 31 |  |  |  |  |  |  |  |
| 1 |  |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  | Employee Signature |
| 4 |  |  |  |  |  |  |  |
| 5 |  |  |  |  |  |  |  |
| 6 |  |  |  |  |  |  | Supervisor Signature |
| 7 |  |  |  |  |  |  |  |
| 8 |  |  |  |  |  |  |  |
| 9 |  |  |  |  |  |  |  |
| 10 |  |  |  |  |  |  | Please submit to Payroll by the $15^{\text {th }}$ of the month. |
| 11 |  |  |  |  |  |  |  |
| 12 |  |  |  |  |  |  |  |
| 13 |  |  |  |  |  |  |  |
| 14 |  |  |  |  |  |  | Sick time is for missed scheduled work time. |
|  |  |  |  | TOTAL |  |  |  |

