

## Student Payroll Time Report for Federal / CalWORKs Work-Study Employees

### **Instructions: PLEASE READ CAREFULLY**

1. Print or type the required information in **blue** or **black** ink only.
2. Report actual hours worked each day in the appropriate date space.
3. **Payment for hours worked Saturdays, Sundays or Holidays require prior approval by FWS and/or CWWS coordinator.**
4. Reporting Period begins the 16<sup>th</sup> of the month, ends the 15<sup>th</sup> of the following month and is paid at the end of the month.
5. **Supervisor or department staff must submit time reports to FWS Coordinator by the 16<sup>th</sup> of each month in person or by mail. Time reports delivered by students will not be processed.**
6. **Students cannot work over 8 hours a day or over 20 hours per week.**
7. Employees must take a minimum 30-minute non-payable break after working for six (6) consecutive hours.
8. Full and **original signatures** of the authorized supervisor and the employee are required.

Last Name	First	Initial	EMPLID
Position		Department	

### Account Number

Code	Account	Department	Program	Project/Grant	%
K	235400	475200		1112200	
	235100				
K	235100	331200	64650	1612020	

Reporting Period from       /16/       through       /15/      

### Hours Worked

16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	1	2
3	4	5	6	7	8	9	10	11	12	13	14	15	Total				

**I certify that the above information is true and correct.**

Number of units currently taking: \_\_\_\_\_

(Required: 6 Fall & Spring semester; 3 Summer session)

Supervisor's Name (print) \_\_\_\_\_

Ext. \_\_\_\_\_

Employee's Signature \_\_\_\_\_

Date \_\_\_\_\_

Supervisor's Signature \_\_\_\_\_

Date \_\_\_\_\_

Financial Aid Advisor's Signature \_\_\_\_\_

Date \_\_\_\_\_

CalWORKs Staff Assistant Signature \_\_\_\_\_

Date \_\_\_\_\_

### For Office Use Only

Hourly Rate \$ \_\_\_\_\_ x Hrs. \_\_\_\_\_ = \$ \_\_\_\_\_ FWS \$ \_\_\_\_\_ CWWS \$ \_\_\_\_\_