Payroll Time Report for Student Employees

Instructions: PLEASE READ CAREFULLY

1. Print or type the required information. **BLUE OR BLACK INK. DO NOT USE PENCIL.**
2. Report actual hours worked each day and sick leave hours in the appropriate date space.
3. Report sick leave absences for scheduled work hours only.
4. Reporting Period is from the 16th of the month through the 15th of the following month.
5. Time Report is due in Payroll Services on the 16th of each month, and it is paid at the end of the month.
6. Employees must take a minimum 30-minute non-payable break after working for six consecutive hours.
7. Full and original signatures of the authorized supervisor and the employee are required.
8. Employees must report change of address to the Human Resource Services Office.

Reporting Period from _____ **/16/** _____ through _____ **/15/** _____

This section completed by supervisor:

Sick Leave Absence Date(s) _____ Total Hours _____

Actual Sick Leave Balance: _____ Date of Hire: _____

Account Number

Code	Account	Department	Program	Project/Grant	%

Last Name First Initial	EMPLID

Position	Department

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: 12 Fall & Spring Semester; 6 Summer Session)

_____
Supervisor's Signature

_____
Employee's Signature

_____
Supervisor's Name - printed
Ext. #

For Payroll Use Only

Reg. Rate $_____ x Hrs. _____ = **$_____**

OT Rate $_____ x Hrs. _____ = **$_____**

Gross Total Pay $_____

Revised 9/23/15