Time sheet

**MONTH/YEAR:**

This form is to be used by an employee and/or supervisor to record hours worked/shift differential hours that have not previously been submitted to Payroll. This form must be signed by the employee and supervisor before processing. Time recorded on this form must be in intervals of quarter hours. See the payroll calendar for submission deadlines. Please print legibly.

**Last Name First Name s#**

**Position ID Supervisor**

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

 **Total Hours**

**Employee Signature Date**

**Supervisor Signature Print Name Date**