Student Time Sheet

NAME_____ Soc. Sec.#_____
(last) (first)

Account #_____ Hourly Rate $_____

WEEKLY TIME REPORTS

Week #1 WEEK ENDING_____

Date	Days	Hours Worked	
	in		
	SUNDAY out		
	in		
	MONDAY out		
	in		
	TUES. out		
	in		
	WED. out		
	in		
	THURS. out		
	in		
	FRIDAY out		
	in		
	SAT. out		

TOTAL

WEEK 1

Hours Worked

TOTAL_____

Week #2 WEEK ENDING_____

Date	Days	Hours Worked	
	in		
	SUNDAY out		
	in		
	MONDAY out		
	in		
	TUES. out		
	in		
	WED. out		
	in		
	THURS. out		
	in		
	FRIDAY out		
	in		
	SAT. out		

WEEK 2

Hours Worked

TOTAL_____

Signature of Employee_____

Authorized Signature _____

FOR PAYROLL USE ONLY

Biweekly Total

Regular _____

Overtime_____

Mandatory for all CWSP Evaluation
Student's work has been:

_____GOOD_____AVERAGE_____POOR