



Student Employee Stipend Timesheet

To be filled out and turned in by the 5th or the 20th of the month to the Student Payroll Office.
Pay periods are from 1st to 15th of the month and from 16th to the end of the month.

Employee Name: _____ Department#: _____ - _____

Social Security: _____ - _____ - _____ Department name: _____

Supervisor name (please print): _____ Extension: _____

For Period Ending: ____ / ____ / ____

Date	Start Time	Out	In	End Time	Daily Total

Weekly Total _____

Date	Start Time	Out	In	End Time	Daily Total

Weekly Total _____

Employee Signature: _____

Date: ____ / ____ / ____

Supervisor Signature: _____

Date: ____ / ____ / ____

Signatures verify that the total hours are correct; all times are reported and a time schedule is on record in the department. If you have any questions, please contact the Student Payroll Office, extension 4421.