



Southern Connecticut State University

Student Worker Timesheet Template

NAME: Prefilled

Employee ID: Prefilled

Record Number: Prefilled

EXAMPLE TIMESHEET

DEPT: Prefilled

Supervisor: Prefilled

Position Number: Prefilled

Day	Date MM/DD/YY	In	Out	In	Out	Total Hours	Day	Date MM/DD/YY	In	Out	In	Out	Total Hours
Friday	10/21/22	10am	2pm			4	Friday	10/28/22	10am	2pm			4
Saturday							Saturday						
Sunday							Sunday						
Monday	10/24/22	10am	2.30pm			4.5	Monday	10/31/22	10am	2pm			4
Tuesday	10/25/22	10am	12pm	1pm	3pm	4	Tuesday	11/01/22	10am	12pm	1pm	3pm	4
Wednesday	10/26/22	10am	2pm			4	Wednesday	11/02/22	10am	2pm			4
Thursday	10/27/22	11am	2.30pm			3.5	Thursday	11/03/22	10am	2pm			4
Total Hours for Week #1: <u>20</u>							Total Hours for Week #2: <u>20</u>						

Total Hours for Pay Period: 40 Rate: \$ 15 Gross Pay: \$ 600

STUDENT CERTIFICATION: I have read the completed content above and certify that the number of hours worked is correct.

Signature of Student: *Student must sign before sending to supervisor* Date: *closing period date*

SUPERVISORS CERTIFICATION: I certify that services have been performed in a satisfactory manner and in accordance with University regulations during the period covered that this report is current in all details. "If this student worker is grant funded, I further certify that all of the time reflected was spent on tasks in furtherance of the Grant Statement of work, BANNER ORG # _____ and Grant Name _____."

Signature of Supervisor: *Supervisor must review and sign before submitting to SPAR* Date: *approval date*

Please note: If you work 7.50 hours or more, you must take and document a half an hour break!

****All hours worked on weekends/holidays must be accompanied with appropriate authorization****