

TIMESHEET — PART-TIME



EMPLOYEE

Name:

Department:

Month/Year:

Hourly Rate:

Job Title:

Week Of	Sun	Mon	Tues	Wed	Thu	Fri	Sat
Time In							
Time Out							
Time In							
Time Out							
Total							

Week Of	Sun	Mon	Tues	Wed	Thu	Fri	Sat
Time In							
Time Out							
Time In							
Time Out							
Total							

Week Of	Sun	Mon	Tues	Wed	Thu	Fri	Sat
Time In							
Time Out							
Time In							
Time Out							
Total							

Week Of	Sun	Mon	Tues	Wed	Thu	Fri	Sat
Time In							
Time Out							
Time In							
Time Out							
Total							

Week Of	Sun	Mon	Tues	Wed	Thu	Fri	Sat	OFFICE USE ONLY
Time In								Total Hours:
Time Out								Total Reg. Hours:
								Total OT Hours:
Time In								Hourly Rate:
Time Out								OT Rate:
Total								Total Wages:

Note: **A Separate Timesheet must be completed for each month.**

EMPLOYEE'S SIGNATURE:

All Timesheets must be signed by the Employee and the Department Supervisor.

Time taken for meal periods is not payable.

DEPART. SUPERVISORS'S SIGNATURE

The normal work week is 40 hours per week. Overtime must be pre-approved by the Department Supervisor
