



Fed FWS: \_\_\_\_\_  
 Inst CWS: \_\_\_\_\_  
 Off Campus: \_\_\_\_\_  
 100%: \_\_\_\_\_  
 75%: \_\_\_\_\_

## WORK-STUDY PROGRAM STUDENT TIME SHEET

Student's Name \_\_\_\_\_ Social Security # \_\_\_\_\_

Department \_\_\_\_\_

Pay Period Ending Date \_\_\_\_\_

**\*Round to the nearest 1/4 hour:**

15 min. = 1/4 hr. = .25 hr.    30 min. = 1/2 hr. = .50 hr.    45 min. = 3/4 hr. = .75 hr.

|                     | DATE | IN | OUT | IN | OUT | IN | OUT | HOURS* |
|---------------------|------|----|-----|----|-----|----|-----|--------|
| SUN                 |      |    |     |    |     |    |     |        |
| MON                 |      |    |     |    |     |    |     |        |
| TUE                 |      |    |     |    |     |    |     |        |
| WED                 |      |    |     |    |     |    |     |        |
| THUR                |      |    |     |    |     |    |     |        |
| FRI                 |      |    |     |    |     |    |     |        |
| SAT                 |      |    |     |    |     |    |     |        |
| SUN                 |      |    |     |    |     |    |     |        |
| MON                 |      |    |     |    |     |    |     |        |
| TUE                 |      |    |     |    |     |    |     |        |
| WED                 |      |    |     |    |     |    |     |        |
| THUR                |      |    |     |    |     |    |     |        |
| FRI                 |      |    |     |    |     |    |     |        |
| SAT                 |      |    |     |    |     |    |     |        |
| <b>TOTAL HOURS*</b> |      |    |     |    |     |    |     |        |

Employee's Signature \_\_\_\_\_

Supervisor's Signature \_\_\_\_\_

*Signature by the Supervisor is certification that the student has worked and earned the amount being paid.*