UNIVERSITY OF NORTHERN COLORADO --- HOURLY TIME SHEET

TIME SHEET I	S FOR:	STUDENT		Begin date:			
		NON-STUDEN	Γ	End date:			
Position BEAR#: Suffix #			NAME:				
FOAP #'s:						Hrly Pay Rate:	
Fund:	Org:	Acct:		Prog:			
Date	Date	Date	Date	Date	Date	Date	Date
Day of week	Day of week	Day of week	Day of week	Day of week	Day of week	Day of week	Day of week
Hrs & Min	Hrs & Min	Hrs & Min	Hrs & Min	Hrs & Min	Hrs & Min	Hrs & Min	Hrs & Min
Date	Date	Date	Date	Date	Date	Date	Date
Day of week	Day of week	Day of week	Day of week	Day of week	Day of week	Day of week	Day of week
Hrs & Min	Hrs & Min	Hrs & Min	Hrs & Min	Hrs & Min	Hrs & Min	Hrs & Min	Hrs & Min
Dept. Name,							
Contact, & phone #:					TWO WEEK TO	OTAL =	0
Monday =M, Tuesday =T, Wednesday =W, Thursday =R, Friday =F, Saturday =Sa, Sunday =Su. Minutes must be rounded to quarter hour only: .00 .25 .50 or .75							
By signing below I am certifying that the hours and minutes shown herein are a complete and accurate record of time worked for the reporting period. If I am a WORK STUDY I also certify that I am currently enrolled in a minimum of 12 undergraduate credit hours or 9 graduate credit hours and am making satisfactory academic progress towards my degree objective.							
If I am a STUDENT HOURLY I also certify that I am currently enrolled in a minimum of 6 undergraduate credit hours or 5 graduate credit hours and am making satisfactory progress towards my degree objective.							
If I am a NON-STUDENT or CLASSIFIED HOURLY worker I also certify that all leave time taken and/or overtime earned or taken as compensatory time was reported and approved by my supervisor.							
Employee Signature: Date:							
I certify that this employee has performed the work reported in a satisfactory manner.							
Supervisor Signature:				Date:			
Authorized FOAP Signature:					Date:		