

<p>State University College at Oneonta</p> <p><u>Federal Work-Study Program Timesheet</u></p>	
<p>Payroll Period Covered ____ / ____ / ____ to ____ / ____ / ____</p>	
<p>Name of Employee _____</p>	
<p>Department or Office _____</p>	

ALL 'IN' and "OUT" entries must be made by the student. Time worked must be in even units of hours and quarter hours. In each "DAILY TOTAL" block, indicate the total hours worked that day.

If the student works "OVER 5 HOURS", he/she must sign out showing a break of **at least 30 minutes** before signing back in to complete their shift.

MAXIMUM HOURS –

20 HOURS PER WEEK While School is in Session, but **must not exceed** Federal Work Study award for this semester.

40 HOURS PER WEEK During Vacation Periods, but **must not exceed** Federal Work Study award for this semester.

DATE							
	THURSDAY	FRIDAY	SATURDAY	SUNDAY	MONDAY	TUESDAY	WEDNESDAY
IN							
OUT							
IN							
OUT							
DAILY TOTAL							

DATE							
	THURSDAY	FRIDAY	SATURDAY	SUNDAY	MONDAY	TUESDAY	WEDNESDAY
IN							
OUT							
IN							
OUT							
DAILY TOTAL							

This time sheet is a true statement of the hours worked by the student. The work assigned has been performed in a satisfactory manner.

Total hours worked _____

ALL INCOMPLETE/INCORRECT TIMESHEETS WILL BE RETURNED. THIS MAY CAUSE DELAY IN PAYMENT.

<p><u>Employee SSN:</u> _____</p> <p><u>Employee Signature:</u> _____</p> <p style="text-align: center;"><u>Date:</u> _____</p>	<p><u>Supervisor Signature:</u> _____</p> <p style="text-align: center;"><u>Date:</u> _____</p>
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