

East Arkansas Community College
College Work-Study Time Sheet

Name:	Social Security Number:
Department Number:	Rate Per Hour: \$
Department:	Pay Period: _____ to _____

Week	Monday		Tuesday		Wednesday		Thursday		Friday		
	in	out	in	out	in	out	in	out	in	out	
Totals:											

Week	Monday		Tuesday		Wednesday		Thursday		Friday		
	in	out	in	out	in	out	in	out	in	out	
Totals:											

Week	Monday		Tuesday		Wednesday		Thursday		Friday		
	in	out	in	out	in	out	in	out	in	out	
Totals:											

Week	Monday		Tuesday		Wednesday		Thursday		Friday		
	in	out	in	out	in	out	in	out	in	out	
Totals:											

Week	Monday		Tuesday		Wednesday		Thursday		Friday		
	in	out	in	out	in	out	in	out	in	out	
Totals:											

GRAND TOTAL:

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WE HEREBY CERTIFY THAT THE ABOVE IS A TRUE STATEMENT OF THE HOURS WORKED AND PERFORMED SATISFACTORILY. **Please note that you cannot work over 20 hours per week.** Time sheet is due by Noon, 12th of each month. Late time sheets will not be processed until the next month!

SUPERVISOR

STUDENT