



Federal Work-Study Time Card

Name _____

Pay Period (see schedule) ____/____/____ to ____/____/____

Student ID number _____

Employer _____

Date	In	Out	In	Out	Daily Hours
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					
21					
22					
23					
24					
25					
26					

Date	In	Out	In	Out	Daily Hours
27					
28					
29					
30					
31					
01					
02					
03					
04					
05					
06					
07					
08					
09					
10					

Total Hours Worked

*If the student is reporting sick leave write out "SICK LEAVE" on that day and hours reporting.

Use one time sheet per pay period. Students may not work more than 15 hours per week. If you work six or more hours you are required to take a minimum thirty minute unpaid lunch break. Incomplete timecards will not be processed. All documents must be received prior to first pay period. Late timecards will be processed with the next available pay period.

Student employee: by signing this timecard, you certify that you have worked the hours indicated and that you meet all FWS requirements, including at least half-time enrollment and Satisfactory Academic Progress.

Supervisor: by signing this timecard, you certify that the student listed above has satisfactorily worked the hours indicated above and has earned the amount being paid.

Student's Signature _____ Date _____

Supervisor's Signature _____ Date _____