

<b>First Name</b>	<b>Last Name</b>	<b>Personnel Number</b>

Date:	Hours Worked:	Regular Hours:	Hourly Rate:	Shift Premium:	Earnings Type:	O.T. Hours:	(1.5)	(2.0)
SUN:								
MON:								
TUES:								
WED:								
THURS:								
FRI:								
SAT:								
<b>WEEK #1 TOTAL:</b>								

Date:	Hours Worked:	Regular Hours:	Hourly Rate:	Shift Premium:	Earnings Type:	O.T. Hours:	(1.5)	(2.0)
SUN:								
MON:								
TUE:								
WED:								
THURS:								
FRI:								
SAT :								
<b>WEEK #2 TOTAL:</b>								

Comments: \_\_\_\_\_

\$ \_\_\_\_\_  
Hourly Rate                                      Supervisor's Signature                                      Date

Submit to Human Resource, Academic Annex, Room 112

**PAYROLL USE ONLY**

	Number of Hours:	Hourly Rate:	Shift Premium:	Total:
CC				
FC				
<b>OT/DT/Standby Hours:</b>				
CC				
FC				
<b>Vacation Pay Adjustment %</b>				
<b>Gross Pay:</b>				