

TIME SHEET

(For hourly/non-exempt personnel)

	DATE	IN/OUT	IN/OUT	TOTAL HOURS
Mon				
Tues				
Wed				
Thurs				
Fri				
Sat				
Sun				

Total hours this week:_____

Name:_____ Approved:_____

Supervisor/Dept Head

Please check:

***Have you totaled your hours?**

***Have you entered time out and time in for lunch?**

***Have you signed your time sheet?**