

Glendale Community College
Student Assistant – Monthly Time Sheet

Student Name:

GCC ID #:

Pay Period:

Total Hours for this pay period:

Sick Leave Hours used for this pay period:

Department:

| Week of | | | | | |
|-----------------|--|--|--|--|--|
| Monday | | | | | |
| Tuesday | | | | | |
| Wednesday | | | | | |
| Thursday | | | | | |
| Friday | | | | | |
| Saturday | | | | | |
| Sunday | | | | | |
| TOTAL# of Hours | | | | | |

For Supervisors Use:

Account Number:

Hourly Rate:

Supervisor's Name:

Date:

Special Notes:

*Due Dates are listed on the Student Assistant Payroll Schedule.

*Late timesheets will result in a month delay in payment and must be approved by the Director of Career Services.

*Any timesheet more than a month late must be approved by the Director of Career Services.

*Sick leave must be reported, please note on the date and # of hours.

*The work of the Student Assistant was completed satisfactorily.

*I hereby certify that all information is accurate.