

TIMESHEET

OTIS COLLEGE OF ART AND DESIGN

Name (print): _____ **Otis ID #:** _____

Hiring Department: _____ **Position:** _____

DEADLINE: The day after the end of the pay period.
Time sheet must be filled out completely and signed by employee and supervisor

MONTH:							
Pay Period 1st -15th	Pay Period 16th-31st	DAY OF WEEK	TIME IN	LUNCH BREAK (in/out)	TIME OUT	SUPERVISOR INITIAL	TOTAL HOURS
1 st	16 th						
2 nd	17 th						
3 rd	18 th						
4 th	19 th						
5 th	20 th						
6 th	21 st						
7 th	22 nd						
8 th	23 rd						
9 th	24 th						
10 th	25 th						
11 th	26 th						
12 th	27 th						
13 th	28 th						
14 th	29 th						
15 th	30 th						
	31 st						
TOTAL HOURS WORKED FOR THIS PERIOD							

I certify that all time reported is correct and employee completed work satisfactorily. Supervisor Signature: Budget #:	Employee Signature:
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FOR PAYROLL USE: _____ **PAYROLL #:** _____ **PAYCODE:** _____

TOTAL HOURS: _____ X HOURLY RATE _____ = PAY THIS AMOUNT