

Three Rivers Community College Student Time Sheet

Beginning Friday _____ and Ending Thursday _____

Student Name _____

Department _____

Rounding Key
15 minutes = .25
30 minutes = .50
45 minutes = .75

	Fri	Sat	Sun	Mon	Tue	Wed	Thur	Total Hours
Week One								
Week Two								

I hereby certify that the above is a true statement of the hours worked by the student listed and that the student listed has performed their jobs in a satisfactory manner. Additionally, this serves as a confirmation that each student has completed the proper paperwork and is eligible to work.

Student Signature

Supervisor Signature



For Office Use Only			
Total Hours Worked	Rate of Pay	Gross Pay	Payroll #