RICE UNIVERSITY
COLLEGE WORK-STUDY PROGRAM
STUDENT TIME SHEET

* ☐ **UNDERGRADUATE ACCT #60810**
* ☐ **GRADUATE ACCT #60880**

* NAME (PRINT) _____

* STUDENT ID NO. _____
* DEPARTMENT _____
* DEPARTMENT NO. _____ *PERIOD ENDING _____

NOTE TO STUDENT – YOU MUST FILL OUT TOP PORTION COMPLETELY

* HRS. WORKED 1ST WEEK							* HRS. WORKED 2ND WEEK							*TOTAL HRS.				*COMPLETE ONLY IF CHANGED FROM SPAF			
S	M	T	W	T	F	S	S	M	T	W	T	F	S	REG.	OVT.	RATE/AMT		FUND	ORG	ACCT	PROG

SUBMIT ORIGINAL TO PAYROLL DEPT – 26TH FLOOR – MHMP - #2650 – **TIME SHEETS ARE DUE ON FRIDAY BY 12: NOON**

ALL ASTERISK AND BOLD PRINT AREAS MUST BE FILLED OUT COMPLETELY BEFORE TIMESHEET CAN BE PAID.

* _____
SUPERVISOR **DATE**

* _____
PAYEE SIGNATURE **DATE**

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