

Time Reporting Form -GSI, GSR, OTHER HOURLY APPOINTEES

Name: _____ Payroll Title: _____ Workstudy: yes no

Month: _____ Year: _____

Day	Time In	Time Out	Time In	Time Out	Time In	Time Out	Total hours worked	
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								
11								
12								
13								
14								
15								
16								
17								
18								
19								
20								
21								
22								
23								
24								
25								
26								
27								
28								
29								
30								
31								
Enter your hours on corresponding dates above							Total	<input type="text"/>

STUDENT's Signature Date

Supervisor's Signature Date

For Department Use Only

Acct/fund/sub

Submitted to OPTRS by deadline: _____

Acct/fund/sub

Submitted late to OPTRS: _____

Remarks:
