RICE

RICE UNIVERSITY
RICE UNIVERSITY WORK 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/AMOUNT				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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