

**UNIVERSITY OF WISCONSIN - MADISON
STUDENT HOURLY TIME REPORT**

_____ Regular
_____ Work Study

NAME _____
(Please Print) Last First MI

EMPLOYING DEPT _____

SOC SEC NUMBER _____ HOURLY RATE _____

PI/PROJECT _____

PAY PERIOD _____ THROUGH _____

| When entering time, use HOURS:MINUTES (Examples: 8:00/1:30/0:45/0:30) | | | | | | | OFFICE USE ONLY | | |
|--|------|-----------------------------------|-----------|-----------|----------|------------------------------|-------------------------------|----------|----|
| | Date | WORK SHIFT ACTUAL HOURS WORKED | | | | Number Of Hours Worked | | OVERTIME | |
| | | Begin Time | Lunch Beg | Lunch End | End Time | | | OT | OS |
| Sunday | | | | | | | WEEK ONE TOTAL HOURS | | |
| Monday | | | | | | | | | |
| Tuesday | | | | | | | | | |
| Wednesday | | | | | | | | | |
| Thursday | | | | | | | | | |
| Friday | | | | | | | | | |
| Saturday | | | | | | | | | |
| WEEKLY TOTALS: | | | | | | | | | |
| Sunday | | | | | | | WEEK TWO TOTAL HOURS | | |
| Monday | | | | | | | | | |
| Tuesday | | | | | | | | | |
| Wednesday | | | | | | | | | |
| Thursday | | | | | | | | | |
| Friday | | | | | | | | | |
| Saturday | | | | | | | | | |
| WEEKLY TOTALS: | | | | | | | | | |
| TOTAL HOURS WORKED IN BIWEEKLY PERIOD | | | | | | | | | |

STUDENT SIGNATURE _____

DATE _____

SUPERVISOR'S CERTIFICATION:

Accounting Distribution
of "TOTAL HOURS WORKED"

| Fund | Acct | Div | Dept | Act | Hours |
|------|------|-----|------|-----|-------|
| | | | | | |
| | | | | | |
| | | | | | |

I confirm that I have first-hand knowledge, or other suitable means of verifying the work performed by the employee, and that the above accounting distribution of "Total Hours Worked" represents a reasonable estimate of the satisfactorily performed work.

SUPERVISOR SIGNATURE _____

DATE _____