SOUTHEASTERN LOUISIANA UNIVERSITY - STUDENT TIME SHEET

Student's Last Name First M.I.

Workday / Employee ID

Workday Dept/Grant Name

Workday Budget Unit

Phone Number

Supervisor's Signature

Employee's Signature

1st Week

	DATE	In	Out	In	Out	In	Out	Total Hours
Sunday								
Monday								
Tuesday								
Wednesday								
Thursday								
Friday								
Saturday								

2nd Week

	DATE	In	Out	In	Out	In	Out	Total Hours
Sunday								
Monday								
Tuesday								
Wednesday								
Thursday								
Friday								
Saturday								

3rd Week

	DATE	In	Out	In	Out	In	Out	Total Hours
Sunday								
Monday								
Tuesday								
Wednesday								
Thursday								
Friday								
Saturday								

4th Week

	DATE	In	Out	In	Out	In	Out	Total Hours
Sunday								
Monday								
Tuesday								
Wednesday								
Thursday								
Friday								
Saturday								