

<b>Time Card</b>
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Month \_\_\_\_\_ Year \_\_\_\_\_ Name \_\_\_\_\_

Your time card must be turned in on the 20th of each month. Have the instructor or supervisor sign below, verifying that the hours are correct. If your supervisor is not available, turn your time card in by the deadline and get signatures later.

Name of Instructor/Supervisor \_\_\_\_\_ Course/Project \_\_\_\_\_

Day	Date	Month	Hours	Day	Date	Month	Hours
M T W TH F Sat Sun	<b>21</b>	_____	_____	M T W TH F Sat Sun	<b>6</b>	_____	_____
M T W TH F Sat Sun	<b>22</b>	_____	_____	M T W TH F Sat Sun	<b>7</b>	_____	_____
M T W TH F Sat Sun	<b>23</b>	_____	_____	M T W TH F Sat Sun	<b>8</b>	_____	_____
M T W TH F Sat Sun	<b>24</b>	_____	_____	M T W TH F Sat Sun	<b>9</b>	_____	_____
M T W TH F Sat Sun	<b>25</b>	_____	_____	M T W TH F Sat Sun	<b>10</b>	_____	_____
M T W TH F Sat Sun	<b>26</b>	_____	_____	M T W TH F Sat Sun	<b>11</b>	_____	_____
M T W TH F Sat Sun	<b>27</b>	_____	_____	M T W TH F Sat Sun	<b>12</b>	_____	_____
M T W TH F Sat Sun	<b>28</b>	_____	_____	M T W TH F Sat Sun	<b>13</b>	_____	_____
M T W TH F Sat Sun	<b>29</b>	_____	_____	M T W TH F Sat Sun	<b>14</b>	_____	_____
M T W TH F Sat Sun	<b>30</b>	_____	_____	M T W TH F Sat Sun	<b>15</b>	_____	_____
M T W TH F Sat Sun	<b>31</b>	_____	_____	M T W TH F Sat Sun	<b>16</b>	_____	_____
M T W TH F Sat Sun	<b>1</b>	_____	_____	M T W TH F Sat Sun	<b>17</b>	_____	_____
M T W TH F Sat Sun	<b>2</b>	_____	_____	M T W TH F Sat Sun	<b>18</b>	_____	_____
M T W TH F Sat Sun	<b>3</b>	_____	_____	M T W TH F Sat Sun	<b>19</b>	_____	_____
M T W TH F Sat Sun	<b>4</b>	_____	_____	M T W TH F Sat Sun	<b>20</b>	_____	_____
M T W TH F Sat Sun	<b>5</b>	_____	_____	<b>Total Hours</b>			_____

I certify that the above hours are correct:

\_\_\_\_\_  
Signature of Instructor/Supervisor

\_\_\_\_\_  
Signature of Employee