



Please check the one that applies	
Student Hourly/ Work-study	<input type="checkbox"/>
Classified Hourly/ Temp.	<input type="checkbox"/>
Administrative Hourly	<input type="checkbox"/>

## Hourly Timesheet

Payroll #: 17 Dates: August 16 – 31, 2022 Rate of Pay: \$ \_\_\_\_\_

Name: \_\_\_\_\_ 90\_# \_\_\_\_\_

Banner Account \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
 FOAP Fund ORG Account Program

Supervisor: \_\_\_\_\_

Dept/ Agency: \_\_\_\_\_ Phone # \_\_\_\_\_

\*Hours should be rounded to the nearest quarter hour and in decimal form. Example: One hour and 15 minutes = 1.25 hours, 1 ½ hours = 1.50, and 1 ¼ hours equals 1.75. One hour and 5 minutes should be recorded 1.0 hour and one hour and ten minutes should be recorded 1.25 hours.

Day	Date	In	Out	In	Out	Regular Hours	Sick Leave
Tuesday	8/16/22						
Wednesday	8/17/22						
Thursday	8/18/22						
Friday	8/19/22						
Saturday	8/20/22						
Sunday	8/21/22						
Monday	8/22/22						
Tuesday	8/23/22						
Wednesday	8/24/22						
Thursday	8/25/22						
Friday	8/26/22						
Saturday	8/27/22						
Sunday	8/28/22						
Monday	8/29/22						
Tuesday	8/30/22						
Wednesday	8/31/22						

**Timesheets are due September 1, 2022**

- Off-Campus Agencies - Please email to [payroll@msudenver.edu](mailto:payroll@msudenver.edu) by 5pm.

**Payday is September 15, 2022**

Total Regular Hours: \_\_\_\_\_  
 Total Sick Leave Taken: \_\_\_\_\_

I hereby certify that I have worked the hours indicated and that this time sheet is correct.

Employee's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

I hereby certify that the above named employee worked the hours reported.

Supervisor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_