



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 #: 3 Dates: January 16 - 31, 2022 Rate of Pay: \$ \_\_\_\_\_

Name: \_\_\_\_\_ 900#: \_\_\_\_\_

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 ¾ 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	Hours	Sick Leave
Sunday	1/16/22						
Monday	1/17/22						
Tuesday	1/18/22						
Wednesday	1/19/22						
Thursday	1/20/22						
Friday	1/21/22						
Saturday	1/22/22						
Sunday	1/23/22						
Monday	1/24/22						
Tuesday	1/25/22						
Wednesday	1/26/22						
Thursday	1/27/22						
Friday	1/28/22						
Saturday	1/29/22						
Sunday	1/30/22						
Monday	1/31/22						

**Timesheets are due February 1, 2022;**

- **Off-Campus Agencies** – Supervisors please email to [payroll@msudenver.edu](mailto:payroll@msudenver.edu) by 5:00pm.

**Payday is February 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: \_\_\_\_\_