

Time Sheet Work Study Students and Part Time Staff

Name:		Supervisor:	
Timesheet for Week Ending: Saturday,			
		(eg. June 7, 2	018)
What is your role	e?		
Work Study Student			
Part-Time	e Employee		
Please make sur	e that:		
The hour	s reported below cover only	y one week (Si	unday to Saturday)
I will email this sheet to cmramsde@uwo.ca			
I will CC r	my supervisor in my email to	o Christine	
	DATE	HOURS	Brief Description of Work
SUNDAY			
MONDAY			
TUESDAY			
WEDNESDAY			
THURSDAY			
FRIDAY			
SATURDAY			
	TOTAL		