



UNIVERSITY STUDENT RESOURCE CENTRE (USRC) FORM: USRC 11

WORK/STUDY MONTHLY TIME SHEET

MONTH: _____

NAME OF STUDENT _____ I.D. # _____

PROGRAMME OF STUDY _____

ASSIGNED WORK/STUDY DEPARTMENT _____

POSITION _____

DATE	ARRIVAL TIME	LUNCH		DEPARTURE TIME	HOURS WORKED
		OUT	IN		
TOTAL HOURS WORKED					

RATE OF PAY/FLAT PAY \$ _____ TOTAL STIPEND (RATE OF PAY X TOTAL HOURS WORKED) _____

STUDENT'S SIGNATURE _____ DATE _____

SUPERVISOR'S NAME (block letters) _____

SUPERVISOR'S SIGNATURE _____ DATE _____