

Rust College Student Worksite SIGN-IN/SIGN-OUT SHEET

This form is to be used by all students on work study as a daily sign-in/out sheet.

Please Print

_

Student's Name: _____

Student ID: _____.

Month_____

Academic School Year_____

Supervisor's Name:

Department: _____

First Week

	First week								
Week Days	Dates	Name of Activity Brief Description	Beginning Time	Ending Time	Student's Signature	Supervisor's Signature	Total Hours		
Monday						organical c			
Tuesday									
Wednesday									
Thursday									
Friday									
Saturday									
Sunday									

Second Week

Week Days	Dates	Name of Activity Brief Description	Beginning	Ending	Student's Signature	Supervisor's Signature	Total Usurra
		Briel Description	Time	Time		Signature	Hours
Monday							
		_					
Tuesday							
Wednesday							
Thursday							
Friday							
Saturday							
Sunday							

Student ID:

.

Third Week

Week Days Dates Name of Activity Beginning Ending Student's Signature Supervisor's Total							
Dates	Name of Activity	Beginning	Ending	Student's Signature	Supervisor's	Total	
	Brief Description	Time	Time		Signature	Hours	
	-						
	Dates	Dates Name of Activity Brief Description Image: Constraint of the second structure Image: Constraint of the second structure Image: Constraint of the second structure Image: Constraint of the second structure Image: Constraint of the second structure Image: Constraint of the second structure Image: Constraint of the second structure Image: Constraint of the second structure Image: Constraint of the second structure Image: Constraint of the second structure Image: Constraint of the second structure Image: Constraint of the second structure Image: Constraint of the second structure Image: Constraint of the second structure Image: Constraint of the second structure Image: Constraint of the second structure Image: Constraint of the second structure Image: Constraint of the second structure Image: Constraint of the second structure Image: Constraint of the second structure Image: Constraint of the second structure Image: Constraint of the second structure Image: Constraint of the second structure Image: Constraint of the second structure Image: Constraint of the second structure Image: Constraint of the second structure Image: Constraint of the second structure Image: Constraint of the second structure Image: Constructure Image: Constraint of the sec	Dates Name of Activity Beginning	Dates Name of Activity Beginning Ending	Dates Name of Activity Beginning Ending Student's Signature	Dates Name of Activity Beginning Ending Student's Signature Supervisor's	

Fourth Week

Week Days	Dates	Name of Activity Brief Description	Beginning Time	Ending Time	Student's Signature	Supervisor's Signature	Total Hours		
Monday									
Tuesday									
Wednesday									
Thursday									
Friday									
Saturday									
Sunday									

Note to Supervisors: Please file this form in the Work Study Student's file in your office for future references. The Student may make a copy of this form for their personal file.

Hours worked and recorded on this form must be transferred to the Master <u>Time Sheet</u> which must be returned to the Financial Aid Office to be processed for compensation.