



# Health Science Center at Brooklyn of the State University of New York

STUDENT ASSISTANT

Student Employee:

Department Name:

Social Security Number:

Department Budget Acct. No.:

Hours must be reported in quarter hours units only.

Day	Date	Time In	Time Out	Time In	Time Out	HRS. Worked
Thursday						
Friday						
Saturday						
Sunday						
Monday						
Tuesday						
Wednesday						
Thursday						
Friday						
Saturday						
Sunday						
Monday						
Tuesday						
Wednesday						

Line No.:

PAYPERIOD

Beginning:

Ending:

TOTAL  
HOURS:

I have examined these entries and certify them to be correct:

Student's Signature

Supervisor's Signature

## IMPORTANT - PLEASE READ

1. Student is required to sin time sheet.
2. There are no advances for late time sheets.
3. There is no individual pick-up of checks.
4. Please enter the correct budget account number in the space provided.
5. When classes are in session, 20 hours per week are the maximum hours allowed.  
After (5) consecutive hours, you must take a lunch break which should be reflected on the time sheet.