Georgetown University Student Employment Office

Student Employee Time Sheet and Verification form

Georgetown University Student Employment Office
3520 Prospect Street, NW | Car Barn, Suite 304 | Washington, DC 20057
Phone: (202) 687-4187 | Fax: (202) 784-4877 | finseo@georgetown.edu

Employer / Agency Name: _____

Student Name : _____ **NetID:** _____

Pay Period Begin Date: _____ **Pay Period End Date:** _____
(MM/DD/YYYY)   (MM/DD/YYYY)

If filling electronically - **enter the Pay Period Begin Date as MM/DD/YYYY** so that the other dates will auto-fill correctly!

Week 1 - Day & Date	Time In	Time Out	Shift Total	Week 2 - Day & Date	Time In	Time Out	Shift Total
Monday				**Monday**			
Tuesday				**Tuesday**			
Wednesday				**Wednesday**			
Thursday				**Thursday**			
Friday				**Friday**			
Saturday				**Saturday**			
Sunday				**Sunday**			
Week 1 Total:				**Week 2 Total:**			
				Pay Period Total:			

Student Signature: _____ **Date:** _____

Verification of Hours

ATTENTION SUPERVISOR: Please verify that the correct number of hours has been submitted for this payroll period. Completed forms must be faxed to the Georgetown Student Employment office at (202) 784-4877 no later than 10:00am on the date indicated on the Georgetown payroll schedule. Completed timesheets may be faxed as soon as the student has completed their last day of work in the payroll period.
The original timesheet must be retained and submitted to the Student Employment Office at the end of the academic year.

SUPERVISOR VERIFICATION:
I certify that this student has worked the hours reported on this time record in a satisfactory manner and has earned the amount being paid.

Supervisor's/Authorized Printed Name: _____

Supervisor's/Authorized Signature: _____ **Date:** _____