

GAVILAN JOINT COMMUNITY COLLEGE
Faculty Timesheet to be paid at End of Month
*****Due to Supervisor on the 15th of each month*****

Last Name		First Name			G00#		Month/Year					
Org#	Account #			Assignment Description:								
Date	Time In	Time Out	Time In	Time Out	Hours Worked (Please enter payrate in the box at the bottom)						Subbed For:	
					Lecture	Lab	Non Credit	Library	Counseling	Mtg Rate		
1												
2												
3												
4												
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28												
29												
30												
31												
					-	-	-	-	-	-		

*Employee Signature _____ Date _____
Due to Supervisor on the 15th of each month.
**This is a legal document. Your signature confirms that worked these hours.*

Approved by Signature _____ Date _____
Supervisors turn in timesheets to Payroll By the 18th of each month.

	Total Hours	Pay Rate	Total \$
Lecture	-		\$ -
Lab	-		\$ -
Non Credit	-		\$ -
Library	-		\$ -
Counseling	-		\$ -
Meeting Rate	-		\$ -
Total \$		\$	-