

TANF Youth Programming
Paid Work Experience Timesheet

Employee (Participant) Name:

Pay Period Start Date:

Pay Period End Date:

Program Staff:

Program – Provider:

Instructions:

- Complete the information at the top of the sheet.
- After each day that you work, enter the Date, Time In, and Time Out. When recording your times, round to the nearest fifteen minutes. For example: if you started work at 9:27 am, you should enter 9:30 am; if you ended work at 5:07 pm, you should enter 5:00 pm.
- Once you are certain that everything is correct for that day, write your initials in the Employee Initials box.
- Hand the timesheet to your supervisor, so that she/he may verify all of the information and place her/his initials in the Supervisor Initials box.
- Add up the hours for that day in the Total Time box.
- Once you have completed the timesheet for the two-week pay period, calculate the total hours that you worked. You and your supervisor must sign the form to confirm that everything is correct.

DAY	DATE	TIME IN	TIME OUT	LUNCH (IF APPLICABLE)			EMPLOYEE INITIALS	SUPERVISOR INITIALS	TOTAL TIME
Monday				<input type="checkbox"/> 30 min	<input type="checkbox"/> 45 min	<input type="checkbox"/> 90 min			
Tuesday				<input type="checkbox"/> 30 min	<input type="checkbox"/> 45 min	<input type="checkbox"/> 90 min			
Wednesday				<input type="checkbox"/> 30 min	<input type="checkbox"/> 45 min	<input type="checkbox"/> 90 min			
Thursday				<input type="checkbox"/> 30 min	<input type="checkbox"/> 45 min	<input type="checkbox"/> 90 min			
Friday				<input type="checkbox"/> 30 min	<input type="checkbox"/> 45 min	<input type="checkbox"/> 90 min			
Saturday				<input type="checkbox"/> 30 min	<input type="checkbox"/> 45 min	<input type="checkbox"/> 90 min			
Sunday				<input type="checkbox"/> 30 min	<input type="checkbox"/> 45 min	<input type="checkbox"/> 90 min			
Monday				<input type="checkbox"/> 30 min	<input type="checkbox"/> 45 min	<input type="checkbox"/> 90 min			
Tuesday				<input type="checkbox"/> 30 min	<input type="checkbox"/> 45 min	<input type="checkbox"/> 90 min			
Wednesday				<input type="checkbox"/> 30 min	<input type="checkbox"/> 45 min	<input type="checkbox"/> 90 min			
Thursday				<input type="checkbox"/> 30 min	<input type="checkbox"/> 45 min	<input type="checkbox"/> 90 min			
Friday				<input type="checkbox"/> 30 min	<input type="checkbox"/> 45 min	<input type="checkbox"/> 90 min			
Saturday				<input type="checkbox"/> 30 min	<input type="checkbox"/> 45 min	<input type="checkbox"/> 90 min			
Sunday				<input type="checkbox"/> 30 min	<input type="checkbox"/> 45 min	<input type="checkbox"/> 90 min			
TOTAL HOURS:									

Participant Signature:

christian

Date:

Program Staff Signature:

Date: