# SAMPLE ADMINISTRATIVE FORM

## WEEKLY TIME SHEET

*Please Print. This Sheet Must Be Filled* *Out and Signed By Employee.*

Employee Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Department: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Employee/Payroll #: \_\_\_\_\_\_\_\_\_\_\_\_\_

| Week Ending | Morning | Afternoon | Overtime | Total | Total |
| --- | --- | --- | --- | --- | --- |

|  \_\_\_\_/\_\_\_/\_\_\_ | In | Out | In | Out | In | Out | Regular Hours | Overtime Hours | OvertimeApproval |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Monday \_\_\_\_/\_\_\_\_/\_\_\_\_ |  |  |  |  |  |  |  |  |  |
| Tuesday \_\_\_\_/\_\_\_\_/\_\_\_\_ |  |  |  |  |  |  |  |  |  |
| Wednesday \_\_\_\_/\_\_\_\_/\_\_\_\_ |  |  |  |  |  |  |  |  |  |
| Thursday \_\_\_\_/\_\_\_\_/\_\_\_\_ |  |  |  |  |  |  |  |  |  |
| Friday \_\_\_\_/\_\_\_\_/\_\_\_\_ |  |  |  |  |  |  |  |  |  |
| Saturday \_\_\_\_/\_\_\_\_/\_\_\_\_ |  |  |  |  |  |  |  |  |  |
| Sunday \_\_\_\_/\_\_\_\_/\_\_\_\_ |  |  |  |  |  |  |  |  |  |
| Weekly Totals |  |  |  |  |

EMPLOYEE’S SIGNATURE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE: \_\_\_\_/\_\_\_\_/\_\_\_\_

SUPERVISOR’S SIGNATURE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE: \_\_\_\_/\_\_\_\_/\_\_\_\_

| THIS FORM MUST BE RECEIVED BY PAYROLLBY: \_\_\_\_\_\_\_ A.M. \_\_\_\_\_\_ P.M.ON \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ OF EACH WEEK | PAYROLL \_\_\_\_\_\_\_\_\_\_\_DATE \_\_\_\_/\_\_\_\_/\_\_\_\_ |
| --- | --- |