Kean University

Student & GA Time Sheet PP27/ 2020

for days worked 12/5/20 through 12/18/20

Employee Name: _____

Employee #: _____ Dept. / CC: _____Phone Ext. _____

FOR USE DURING CAMPUS SHUTDOWN DUE TO CORONAVIRUS PANDEMIC

Week 1						
Date	**Pay Code**	**Start Time**	**Break OUT**	**Break IN**	**End Time**	**Total Hours**
12/5/20						
12/6/20						
12/7/20						
12/8/20						
12/9/20						
12/10/20						
12/11/20						

Week 2						
Date	**Pay Code**	**Start Time**	**Break OUT**	**Break IN**	**End Time**	**Total Hours**
12/12/20						
12/13/20						
12/14/20						
12/15/20						
12/16/20						
12/17/20						
12/18/20						

Comments:

_____

Supervisor Name: (Please Print) _____ **Supervisor Signature:** _____ **Date:** _____