



LEARN & EARN DAILY TIME SHEET

PARTICIPANT'S NAME: _____

ACTIVITY: _____

Paid Earn Experience: _____

LAST 4 DIGITS OF SS#: _____

Paid Learn Activity: _____

WORKSITE: _____

WORK PERIOD DATES _____

SUPERVISOR'S NAME: _____ LEARN & EARN COORDINATOR: _____

| DAY | DATE | IN TIME | LUNCH OUT | LUNCH IN | OUT TIME | TOTAL HOURS | ENROLLEE INITIALS |
|------------------------------|------|---------|-----------|----------|----------|-------------|-------------------|
| MON. | | | | | | | |
| TUES. | | | | | | | |
| WED. | | | | | | | |
| THURS. | | | | | | | |
| FRI. | | | | | | | |
| SAT. | | | | | | | |
| TOTAL NUMBER OF HOURS | | | | | | | |

| DAY | DATE | IN TIME | LUNCH OUT | LUNCH IN | OUT TIME | TOTAL HOURS | ENROLLEE INITIALS |
|------------------------------|------|---------|-----------|----------|----------|-------------|-------------------|
| MON. | | | | | | | |
| TUES. | | | | | | | |
| WED. | | | | | | | |
| THURS. | | | | | | | |
| FRI. | | | | | | | |
| SAT. | | | | | | | |
| TOTAL NUMBER OF HOURS | | | | | | | |

TOTAL NUMBER OF HOURS THIS PERIOD: _____

THIS IS MY CORRECT NUMBER OF HOURS WORKED: _____

LEARN & EARN PARTICIPANT'S SIGNATURE

I CERTIFY THAT THE ABOVE TIME GIVEN IS TRUE AND ACCURATE: _____

SUPERVISOR'S SIGNATURE

ALL TIMESHEETS MUST BE SIGNED IN INK AND TURNED IN PROMPTLY TO INSURE THE TIMELY INSURANCE OF PAYCHECKS, VOUCHERS AND SPECIAL ALLOWANCES.