

San Bernardino Community College District Hourly Assignment Time Sheet

Pay Period	From	To
Day	Total Hours Worked	
**11		
12		
13		
14		
15		
16		
17		
18		
19		
20		
21		
22		
23		
24		
25		
26		
27		
28		
29		
30		
31		
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		
Total Hours:		
Hourly Rate: \$		

Supervisors must total Time Sheets. Failure to do so will result in them being returned.

This is a audit document white-out not acceptable.

Supervisors and hourly employees are mutually responsible for accuracy of Time Sheets. Incorrect Time Sheets will be returned and payment delayed.

All employees who are assigned a daily work schedule of six (6) hours or more shall be required to take a lunch period.

Short-term employees are not authorized to work on weekends or holidays.

Short-term employees shall be employed on an hourly basis and shall be employed for less than 175 days in any school year, including holidays, sick leave, vacation and other leaves of absence irrespective of number of hours worked each day.

Short-term employees working over 30 days per semester may not work over 60 hours per monthly pay period without written approval of the Chancellor or designee

I hereby certify that the hours reported were worked by this employee, that the work was performed in a satisfactory manner, and that there are funds available in current budget or that a budget transfer is in process.

*Signature of Supervisor Date

*Signature of Vice President or Responsibility Center Manager Date

For the use of short-term employee's requesting daily, session, monthly, or semester rate of in the amount of .

Please indicate hours under Total Hours Worked, even though you are paid daily, session, monthly or semester rate.

I here by certify that I have worked the hours listed.

*Signature of Employee Date

Account No. _____

Last 4 Digits of Social Security No. XXX-XX-

Employee Name (Print)

For District Use Only

*Will not be process without signatures.
**11 prior month through 10th of the current month