Trinity College Time Report

Department: 
Pay Period: 
Title: 
Thru: 
Run ID: 
Return By: 
Employee Name: 
Employee ID: 
Standard Hours

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |

Accounting Data:

I hereby certify that this time report correctly reflects all the time worked/leave taken by me for the pay period indicated.

Employee Signature: 
Supervisor Signature: 

Time Reporting Code:

NDP Student - .75 Shift  NSD Student - .50 Shift  NSH Student - .25 Shift
NWF Non Work Study – Flat Amount  NWS Non Work Study – Summer  RSS Regular Non Work Study
RWS Regular Pay – Work Study  WDP CWS - .75 Shift  WSD CWS - .50 Shift
WSH CWS - .25 Shift

Comments: