

SMU EMPLOYEE ID NO.		ORGANIZATION NO.							EMPLOYEE NAME							RC		PAY PERIOD END			
DATE:																					
<b>SOUTHERN METHODIST UNIVERSITY EMPLOYEE TIMECARD</b>	SAT	SUN	MON	TUE	WED	THUR	FRI	WEEK 1	SAT	SUN	MON	TUE	WED	THUR	FRI	WEEK 2					
TOTAL WEEKLY HOURS									TOTAL WEEKLY HOURS												
<b>PARTIAL HOURS:</b> 0 TO 7 MINUTES:    = +0.00 8 TO 22 MINUTES:    = +0.25 23 TO 37 MINUTES:    = +0.50 38 TO 52 MINUTES:    = +0.75 53 TO 59 MINUTES:    = +1.00									<b>REMARKS:</b>									<b>TOTAL PAY PERIOD HOURS:</b>		<b>FOR PAYROLL USE ONLY</b>	
<b>INSTRUCTIONS:</b> 1. COMPLETE BY PRINTING IN INK. 2. TOTAL WEEK 1 AND WEEK 2 HOURS. 3. TOTAL HOURS FOR PAY PERIOD. 4. EMPLOYEE AND SUPERVISOR MUST SIGN BELOW.																					

<b>SIGNATURE REQUIRED</b>																	
EMPLOYEE SIGNATURE _____						SUPERVISOR SIGNATURE _____						CAMPUS PHONE _____					

SMU EMPLOYEE ID NO.		ORGANIZATION NO.							EMPLOYEE NAME							RC		PAY PERIOD END			
DATE:																					
<b>SOUTHERN METHODIST UNIVERSITY EMPLOYEE TIMECARD</b>	SAT	SUN	MON	TUE	WED	THUR	FRI	WEEK 1	SAT	SUN	MON	TUE	WED	THUR	FRI	WEEK 2					
TOTAL WEEKLY HOURS									TOTAL WEEKLY HOURS												
<b>PARTIAL HOURS:</b> 0 TO 7 MINUTES:    = +0.00 8 TO 22 MINUTES:    = +0.25 23 TO 37 MINUTES:    = +0.50 38 TO 52 MINUTES:    = +0.75 53 TO 59 MINUTES:    = +1.00									<b>REMARKS:</b>									<b>TOTAL PAY PERIOD HOURS:</b>		<b>FOR PAYROLL USE ONLY</b>	
<b>INSTRUCTIONS:</b> 1. COMPLETE BY PRINTING IN INK. 2. TOTAL WEEK 1 AND WEEK 2 HOURS. 3. TOTAL HOURS FOR PAY PERIOD. 4. EMPLOYEE AND SUPERVISOR MUST SIGN BELOW.																					

<b>SIGNATURE REQUIRED</b>																	
EMPLOYEE SIGNATURE _____						SUPERVISOR SIGNATURE _____						CAMPUS PHONE _____					