

Jacksonville State University Biweekly Timesheet

Pay Period: Biweekly # _____ Organization Number: _____ Organization Name: _____

JSU Employee Number: _____ JSU Employee Name: _____

	<i>Day of Week</i>	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday	Week Total
	<i>Date</i>								
Week One	Clock In Time								
	Clock Out Time								
	Total Hours								

	<i>Day of Week</i>	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday	Week Total
	<i>Date</i>								
Week Two	Clock In Time								
	Clock Out Time								
	Total Hours								

Total Hours Worked	
Total Gross Pay	

I certify that the information reported hereon is correct.

Employee Signature: _____ Date: _____

Reason for Paper Timesheet: _____

Approved by: _____

Date: _____

Title: _____