

# HOW TO FILL OUT THE DIGITAL TIME SHEET?

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A Guide for Federal Work-Study (FWS) Supervisors

\* The recommended software for using the digital time sheet is Adobe Acrobat.  
Some features of the time sheet may not be compatible with Adobe Acrobat Reader.

# Federal Work-Study (FWS) Digital Time Sheet Template

- A new time sheet template is issued in each academic year.
- FWS supervisors should receive the digital time sheet template will be posted on the Brooklyn College website.
- If you are a FWS supervisor and have questions about the time sheet template, please contact the FWS office immediately.

Phone: (718) 951-5178 or (718) 951-5816

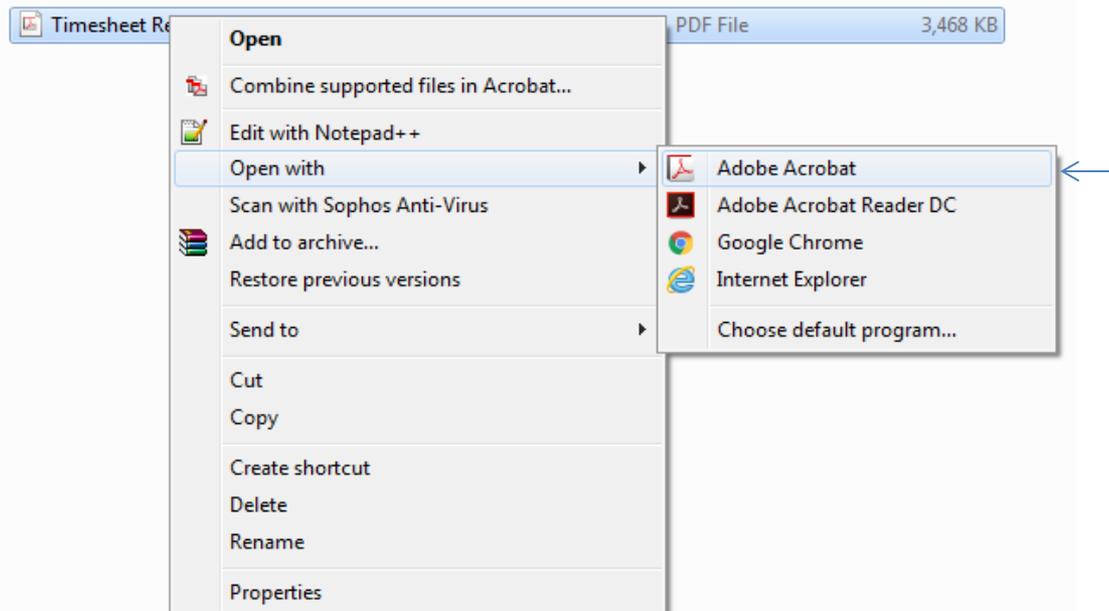
Email: [fws@brooklyn.cuny.edu](mailto:fws@brooklyn.cuny.edu)

# How to save the blank time sheet template to your computer?

- Once you have accessed the time sheet, right click on the attachment and select “save as” and save it to your computer.
- Once you have saved the time sheet template to your computer, you are ready to start using it for all FWS students who have officially been placed with you.

# How to open the time sheet template using Adobe Acrobat?

- If your computer does not open the time sheet in Adobe Acrobat by default, right click on the time sheet file, go to “open with” and click on Adobe Acrobat from the list of programs as shown below. This should result in the time sheet opening.



# How to begin with the new time sheet template?

- Create a separate file for each of your FWS students by opening the blank template and clicking on File → save as and save it as student's last name–first name–PP# (for example, Smith–Smart–PP1)
- Before starting a time sheet for any student for the first time, have a copy of their Federal Work-Study Program Student/Employer Acknowledgements form available (see image on next slide for reference)

**FEDERAL WORK STUDY PROGRAM  
STUDENT/EMPLOYER ACKNOWLEDGMENTS**

20\_\_ - 20\_\_

Date: \_\_\_\_\_

**STUDENT INFORMATION**

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ M.I. \_\_\_\_\_

EMPL. ID# \_\_\_\_\_ LAST 4 DIGITS SS# XXX-XX- \_\_\_\_\_ Cell # (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

ADDRESS \_\_\_\_\_  
Residence Number Street Address APT. City State Zip Code

I certify by my signature below that I have read and understand the rules and policies for the Federal Work Study ("FWS") Program that I have received, and I agree to adhere to these rules and policies. I certify that I am a matriculated student at CUNY; that I am currently enrolled at least half time (six credits or more) or, if I am working in the FWS Program during the summer, will be enrolled at least half time in the Fall semester; and that I am maintaining satisfactory academic progress toward my degree. I understand that if I drop below six credits, I am no longer eligible to work for the FWS Program, and I will promptly inform my supervisor if this occurs. I understand that I am not authorized to work any hours that are in excess of my FWS award, since there will not be FWS funds available to pay me. I recognize that it is my responsibility to maintain records so that I will not exceed the award amount. I also understand that my work-study earnings through the FWS Program constitute taxable income that must be reported on federal, state and city tax returns. Finally, I understand that I am not permitted to perform my work-study duties during class hours.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Email Address: \_\_\_\_\_

**SUPERVISOR INFORMATION**

Dept./Agency: \_\_\_\_\_ Building: \_\_\_\_\_

Agency Address: \_\_\_\_\_  
Street Address Room# City State Zip Code

Supervisor Print Name \_\_\_\_\_ Tel# \_\_\_\_\_ Supervisor Email \_\_\_\_\_

Alt. Supervisor Print Name \_\_\_\_\_ Tel# \_\_\_\_\_ Alt. Sup. Email \_\_\_\_\_

I certify that I have read and understand the rules and policies for the Federal Work Study ("FWS") Program, and I agree to adhere to these rules and policies. I agree to hire the student identified above for the hours specified below, and I will allow the student to continue to work, provided the student performs his/her tasks satisfactorily, until he/she earns the full FWS award or until the date specified below as the "Last Day of Work." I understand that if a student works more than his/her award allows, I will be responsible to pay the student from the funds of my department or agency. I will maintain and submit time sheets to the Federal Work Study Coordinator or his/her designee in the Financial Aid or other designated office in accordance with the published deadlines. I understand that federal regulations stipulate that students must receive timely payment and that incorrectly completed time sheets will be returned to me and may delay payment to the student. Finally, I understand that a student is not allowed to work during class hours.

Supervisor Signature \_\_\_\_\_ Date: \_\_\_\_\_

Alternate Supervisor Signature \_\_\_\_\_ Date: \_\_\_\_\_

**FOR OFFICE USE ONLY**

Summer  Fall  Spring

Orientation Completed: \_\_\_\_\_ First Day to Work: \_\_\_\_\_

FWS Award Summer/Fall: \$ \_\_\_\_\_ Maximum No. of Hours: \_\_\_\_\_ Per Week: \_\_\_\_\_ Total: \_\_\_\_\_ Last Date to Work: \_\_\_\_\_

FWS Award Spring: \$ \_\_\_\_\_ Maximum No. of Hours: \_\_\_\_\_ Per Week: \_\_\_\_\_ Total: \_\_\_\_\_ Last Date to Work: \_\_\_\_\_

Reassignment: Remaining Award: \$ \_\_\_\_\_ Total hours: \_\_\_\_\_ Last Date to Work: \_\_\_\_\_

Position: \_\_\_\_\_ Pay Rate: \_\_\_\_\_ Prior Assignment: \_\_\_\_\_

Agency Code/Business Unit: \_\_\_\_\_ Location Code/Job Data (Department Code/Job Code): \_\_\_\_\_

Referred by: \_\_\_\_\_ Processed by: \_\_\_\_\_ Input Date: \_\_\_\_\_ Approved by or Seal: \_\_\_\_\_

**Statement of Nondiscrimination**

Brooklyn College does not discriminate on the basis of age, gender, gender identity, sexual orientation, alienage or citizenship, religion, race, color, national or ethnic origin, disability, veteran or marital status, or any other category protected under federal, state or city laws in its student admissions, employment, access to programs and administration of educational policies.

Refer to the link below for additional information:

<http://www.brooklyn.cuny.edu/web/about/initiatives/policies/nondiscrimination.php>

Total: \_\_\_\_\_ ← Total Hours Fall

Total: \_\_\_\_\_ ← Total Hours Spring

# How to fill out the time sheet

## Step 1

- Open the student's time sheet template.
- Enter the total hours available for the student on the payroll schedule (pg. 3 of the time sheet) in the first box in the "Available Hours" column based on the placement period.
  - If the student is beginning work in the Summer/Fall semester, enter only the total hours for the Fall semester.
  - If the student is beginning work in the Spring semester and did not work with you during the Fall semester, enter only the Spring total hours.
  - If the student worked with you during the Fall semester and has been approved to continue in the Spring semester, update the total available hours by adding the student's total hours for Spring to the Fall Hours in the box where you entered the student's total hours for the Fall semester.

### 2016 - 2017 Bi-Weekly Payroll for Work Study

For student and site supervisor use

Student's Name: \_\_\_\_\_ Job Location: \_\_\_\_\_ EMPL ID: \_\_\_\_\_

**SIGN UP FOR DIRECT DEPOSIT OR SCHOLAR CARD! FASTER ACCESS TO YOUR FINANCIAL AID MONEY!**

**SPECIAL NOTE:** Time sheets submitted which are not in compliance with FWS payroll procedures will be returned to the supervisor. Unsigned time sheets will be returned for appropriate signature(s). Acceptable signatures are those indicated on the 2016-2017 Federal Work Study Program Student/Employer Acknowledgements form. Late time sheets must have an official letter from the supervisor attached justifying late submission. Time sheets are now due on a Friday unless the student works on the last Saturday of the pay period or the college is closed.

FWS Payroll Assistant: Ms. Jennifer Clarke  
Telephone #: (718) 951-5179 E-mail: jclarke@brooklyn.cuny.edu

Pay Period Number	Pay Period Dates		Available Hours	Used Hours	Timesheet Due Date	Pay Date
	Begin	End				
1	05/29/16	06/11/16			06/10/16	06/23/16
2	06/12/16	06/25/16	0.0		06/24/16	07/07/16
3	06/26/16	07/09/16	0.0		07/08/16	07/21/16
4	07/10/16	07/23/16	0.0		07/22/16	08/04/16
5	07/24/16	08/06/16	0.0		08/05/16	08/18/16
6	08/07/16	08/20/16	0.0		08/19/16	09/01/16
7	08/21/16	09/03/16	0.0		09/02/16	09/15/16
8	09/04/16	09/17/16	0.0		09/16/16	09/29/16
9	09/18/16	10/01/16	0.0		09/30/16	10/13/16
10	10/02/16	10/15/16	0.0		10/14/16	10/27/16
11	10/16/16	10/29/16	0.0		10/28/16	11/10/16
12	10/30/16	11/12/16	0.0		11/11/16	11/23/16
13	11/13/16	11/26/16	0.0		11/25/16	12/08/16
14	11/27/16	12/10/16	0.0		12/09/16	12/22/16
15	12/11/16	12/21/16	0.0		12/23/16	01/03/17
16	12/26/16	01/07/17	0.0		01/06/17	01/19/17
17	01/08/17	01/21/17	0.0		01/20/17	02/02/17
18	01/22/17	02/04/17	0.0		02/03/17	02/16/17
19	02/05/17	02/18/17	0.0		02/17/17	03/02/17
20	02/19/17	03/04/17	0.0		03/03/17	03/16/17
21	03/05/17	03/18/17	0.0		03/17/17	03/30/17
22	03/19/17	04/01/17	0.0		03/31/17	04/13/17
23	04/02/17	04/15/17	0.0		04/14/17	04/27/17
24	04/16/17	04/29/17	0.0		04/28/17	05/11/17
25	04/30/17	05/13/17	0.0		05/12/17	05/25/17
26	05/14/17	05/26/17	0.0		05/26/17	06/08/17

Unused hours: 0

**INTERSESSION (1/3/2017 - 1/24/2017): STUDENTS NOT RETURNING WITH A MINIMUM ENROLLMENT STATUS OF 6 CREDITS IN THEIR DIVISION OF MATRICULATION FOR SPRING 2017 MAY NOT WORK AFTER DECEMBER 21, 2016.** FWS supervisors must e-mail requests to FWS@brooklyn.cuny.edu for approval for student to work after January 2nd. Student may not work until you receive an e-mail approval from the FWS staff.

Memorial Day - 5/30/16	Thanksgiving Recess - 11/24/16 - 11/27/16	Lincoln's Birthday - 2/13/17
Independence Day - 7/04/16	Fall 2016 Final Examinations - 12/14/16 - 12/21/16	Conversion Day - 2/15/17 (Monday Schedule)
Conversion Day - 7/05/16 (Monday schedule)	Last Day of Fall Semester - 12/23/16	President's Day - 2/20/17
Conversion Day - 7/05/16 (Monday schedule)	No Work Scheduled - 12/22/16 - 12/25/16	Spring Recess - 4/10/17 - 4/18/17
Fall Semester Begins - 8/25/16	Holidays Observed - 12/23/16 - 12/28/16 (College Closed)	Conversion Day - 4/20/17 (Monday Schedule)
Labor Day - 9/05/16	New Year - 12/30/16 - 1/2/17	Spring 2017 Final Exams - 5/23/17 - 5/28/17
Conversion Day - 10/05/16 (Monday Schedule)	West Intercession - 1/20/17 - 1/24/17	Last Day of Spring Semester - 5/28/17
Columbus Day - 10/10/16	Martin Luther King Jr. Day - 1/16/17	
Conversion Day - 10/14/16 (Tuesday Schedule)	Spring 2017 Semester Begins - 1/30/17	

## NOTE: Increases/Decreases to FWS Award

- Increases or decreases to the FWS award for a student require the total number of available hours to be recalculated.
- Enter the revised hours in the first box under the “Available Hours” column on pg. 3 of the time sheet template.
- Press enter to update all subsequent hours in that column.
- Save the time sheet before making any other changes.



# Step 3

- Once the required information has been entered on pg. 4, enter the current pay period number based on the payroll schedule (pg. 3 of the time sheet template) in the box titled “Pay Period Number” on the top-right of the page.

Pay Period Number

**THE CITY UNIVERSITY OF NEW YORK  
FEDERAL WORK-STUDY TIME SHEET**

**PLEASE READ INSTRUCTIONS BEFORE FILLING OUT THIS FORM!**

BUSINESS UNIT 

B	K	L	0	1

DEPARTMENT 


12345678

Student's Name Doe John  
Last First

		X	X	X	X

  
Social Security Number

\$ 11.00 Hourly Pay Rate

[Student's E-mail Address]  
Student's email address

[Supervisor's E-mail Address]  
Supervisor's email address

*Return Completed Time Sheet To:* **Financial Aid Office**  
2900 Bedford Avenue  
308 West Quad Center  
Brooklyn, New York 11210

Pay Period Begins \_\_\_\_\_ Pay Period Ends \_\_\_\_\_  
TO

[Supervisor's Name]  
Supervisor's Name (Print)

[Agency Name]  
Agency Name/College Dept. (To be used for "on-campus" position.)

[Agency Address]  
Agency Address

[Work Location]  
Work Location

(123) 123-1234 x 1234  
Work Telephone Number

**Time sheet should be mailed immediately to the Financial Aid Office for the student whose work schedule ends any day prior to the last day of the pay period. Sign in blue or black ink.**

	Mo	Day	IN	OUT	IN	OUT	IN	OUT	TOTAL
SUN.	--	--							0
MON.	--	--							0
TUE.	--	--							0
WED.	--	--							0
THU.	--	--							0
FRI.	--	--							0
SAT.	--	--							0
<b>Total Hours for 1st Week</b> ⇨									0

Current Hours Available: 0

I certify that:

- the record of hours worked, as submitted on this time sheet is correct.
- the hours worked did not conflict with the student's official class schedule on CUNYfirst.
- All work has been performed satisfactorily.  yes  no

\_\_\_\_\_  
Supervisor's signature (blue or black ink)

ALL TIME SHEETS MUST BE MAILED

I certify that:

- the record of hours worked, as submitted on this time sheet is correct.
- the hours I worked did not conflict with my official class schedule on CUNYfirst.

\_\_\_\_\_  
Student's signature (blue or black ink)

Total hours for pay period Remaining hours:

0

0

	Mo	Day	IN	OUT	IN	OUT	IN	OUT	TOTAL
SUN.	--	--							0
MON.	--	--							0
TUE.	--	--							0
WED.	--	--							0
THU.	--	--							0
FRI.	--	--							0
SAT.	--	--							0
<b>Total Hours for 2nd Week</b> ⇨									0

A minimum of a half hour break is required after 6 consecutive hours of work.



# Step 4

- Students must work only in whole hour and/or half hour intervals.
- For each work entry, enter the hours (format is hours:minutes).
- Required minimum half-hour break after every six [6] consecutive hours of work.
- If the student works more than six hours a day, you can use the multiple “IN” and “OUT” fields as shown in the image.
- Hours worked can only be inputted in half-hour or whole hour intervals, for example: 8:00 – 12:30, 3:00 – 6:00 or 9:15 – 2:15

**THE CITY UNIVERSITY OF NEW YORK  
FEDERAL WORK-STUDY TIME SHEET**

Pay Period Number  
**2**

**PLEASE READ INSTRUCTIONS BEFORE FILLING OUT THIS FORM!**

BUSINESS UNIT: 

B	K	L	O	1
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 DEPARTMENT: 

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 EMLPID:

Return Completed Time Sheet To: **Financial Aid Office  
2900 Bedford Avenue  
308 West Quad Center  
Brooklyn, New York 11210**

Student's Name: Doe John Pay Period Begins: 06/12/16 TO: 06/25/16  
Last First Supervisor's Name (Print): \_\_\_\_\_

Social Security Number: 

			X	X	X	X
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 [Agency Name] \_\_\_\_\_  
Agency Name College Dept. (To be used for "on-campus" position.) \_\_\_\_\_

\$ 11.00 Hourly Pay Rate [Agency Address] \_\_\_\_\_  
Agency Address \_\_\_\_\_  
[Student's E-mail Address] \_\_\_\_\_ [Work Location] \_\_\_\_\_  
Student's email address \_\_\_\_\_ Work Location \_\_\_\_\_ Work Address (if different) \_\_\_\_\_  
[Supervisor's E-mail Address] \_\_\_\_\_ (123) 123-1234 X 1234  
Supervisor's email address \_\_\_\_\_ Work Telephone Number \_\_\_\_\_

**Time sheet should be mailed immediately to the Financial Aid Office for the student whose work schedule ends any day prior to the last day of the pay period. Sign in blue or black ink.**

Current Hours Available: **20**

Mo/Day	IN	OUT	IN	OUT	IN	OUT	TOTAL
SUN. 06/12							0
MON. 06/13	9:00	2:00	2:30	5:00			7.5
TUE. 06/14							0
WED. 06/15							0
THU. 06/16							0
FRI. 06/17							0
SAT. 06/18							0
<b>Total Hours for 1st Week</b> ⇨							<b>7.5</b>

I certify that:  
1. the record of hours worked, as submitted on this time sheet is correct.  
2. the hours worked did not conflict with the student's official class schedule on CUNYfirst.  
3. All work has been performed satisfactorily.  yes  no  
Supervisor's signature (blue or black ink) \_\_\_\_\_

**ALL TIME SHEETS MUST BE MAILED**

Mo/Day	IN	OUT	IN	OUT	IN	OUT	TOTAL
SUN. 06/19							0
MON. 06/20							0
TUE. 06/21							0
WED. 06/22							0
THU. 06/23							0
FRI. 06/24							0
SAT. 06/25							0
<b>Total Hours for 2nd Week</b> ⇨							<b>0</b>

I certify that:  
1. the record of hours worked, as submitted on this time sheet is correct.  
2. the hours I worked did not conflict with my official class schedule on CUNYfirst.  
Student's signature (blue or black ink) \_\_\_\_\_

Total hours for pay period:  Remaining hours: **12.5**

SUMMER SESSION I (5/31/16 - 7/12/16)

A minimum of a half hour break is required after 6 consecutive hours of work.



# Important!

- Enter work hours daily. Time sheet provides pop-up alerts when entering hours for conversion days and legal holidays.
- FWS students cannot work on holidays if the supervisor or designated alternate supervisor (college employee) will not be present.
- If job site is open on a legal holiday, the supervisor must attach a memo to any time sheet submitted to confirm work done when the college is officially closed.
- **Student's work schedule must not conflict with class schedule (even if class is cancelled)**
- A memo of justification must be attached to all late time sheets submitted.
- For any special circumstances (hybrid classes, lab exemptions, etc.), contact the FWS payroll assistant.

# Deleting Entries

- If deleting an entry, always delete from right to left, as shown below.

Delete last                      Delete second                      Delete first

	Mo/Day	IN	OUT	IN	OUT	IN	OUT	TOTAL
SUN.	11/26*							0
MON.	11/27	9:00	2:00	3:00	5:00	6:00	7:00	8
TUE.	11/28							0
WED.	11/29							0
THU.	11/30							0
FRI.	12/01							0
SAT.	12/02							0
Total Hours for 1st Week →								8



- Whenever you make changes to the time sheet, remember to save the file.

# IMPORTANT!

- You are required to save a separate copy of the time sheet template for each pay period. The recommended format is: “student’s last name–first name–pay period” (e.g. Smith-Smart-PP#)

# Step 5

- Once you have completed all entries for the pay period, press the  button.

- It will allow you to save and print the time sheet.

- Reminder:

When prompted to save the time sheet, save a copy of the time sheet file in the recommended format (last name-first name-pp#)

Pay Period Number  
**2**

**THE CITY UNIVERSITY OF NEW YORK  
FEDERAL WORK-STUDY TIME SHEET**

**PLEASE READ INSTRUCTIONS BEFORE FILLING OUT THIS FORM!**

BUSINESS UNIT: 

B	K	L	O	1
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 DEPARTMENT: 

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 EMPLID:

Return Completed Time Sheet To: **Financial Aid Office  
2900 Bedford Avenue  
308 West Quad Center  
Brooklyn, New York 11210**

Student's Name: Doe John  
Last First

Pay Period Begins: 06/12/16 TO 06/25/16  
Pay Period Ends

Social Security Number: 

				X	X	X	X
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 [Supervisor's Name] \_\_\_\_\_  
Supervisor's Name (Print)

\$ 11.00 Hourly Pay Rate [Agency Name] \_\_\_\_\_  
Agency Name College Dept. (To be used for "on-campus" position.)

[Student's E-mail Address] \_\_\_\_\_ [Agency Address] \_\_\_\_\_  
Student's email address Agency Address

[Supervisor's E-mail Address] \_\_\_\_\_ [Work Location] \_\_\_\_\_  
Supervisor's email address Work Location Work Address (if different)

(123) 123-1234 X 1234  
Work Telephone Number

**Time sheet should be mailed immediately to the Financial Aid Office for the student whose work schedule ends any day prior to the last day of the pay period. Sign in blue or black ink.**

Current Hours Available: **20**

	Mo	Day	IN	OUT	IN	OUT	IN	OUT	TOTAL
SUN.	06/12								0
MON.	06/13	9:00	2:00	2:30	5:00				7.5
TUE.	06/14								0
WED.	06/15								0
THU.	06/16								0
FRI.	06/17								0
SAT.	06/18								0
<b>Total Hours for 1st Week</b> ⇨									<b>7.5</b>

I certify that:

- the record of hours worked, as submitted on this time sheet is correct.
- the hours worked did not conflict with the student's official class schedule on CUNYfirst.
- All work has been performed satisfactorily.  yes  no

Supervisor's signature (blue or black ink)

**ALL TIME SHEETS MUST BE MAILED**

	Mo	Day	IN	OUT	IN	OUT	IN	OUT	TOTAL
SUN.	06/19								0
MON.	06/20								0
TUE.	06/21								0
WED.	06/22								0
THU.	06/23								0
FRI.	06/24								0
SAT.	06/25								0
<b>Total Hours for 2nd Week</b> ⇨									<b>0</b>

I certify that:

- the record of hours worked, as submitted on this time sheet is correct.
- the hours I worked did not conflict with my official class schedule on CUNYfirst.

Student's signature (blue or black ink)

Total hours for pay period:  Remaining hours:

SUMMER SESSION I (5/31/16 - 7/12/16)

A minimum of a half hour break is required after 6 consecutive hours of work.



# Printing and Signing the Time Sheet

- Supervisor must:
  - Print the time sheet
  - Review entries on the time sheet with the FWS student:
    - Hours worked
    - Accuracy of EMPL ID
    - No class conflict
  - Sign the time sheet
  - Have the student sign the time sheet.
- Supervisor must make two copies of the original signed time sheet:
  - Supervisor's copy
  - Student's copy

**(See Next Slide for Important Information)**

# Signing the Time Sheet: IMPORTANT!

- Time sheet may only be signed by the approved FWS site supervisor on file with the Financial Aid Office.
- The student must sign their own time sheet.
- No other person is authorized to sign on behalf of the student or the FWS supervisor. Signing another person's name on a legal document (any time sheet or official forms/documents) is prohibited.

THE CITY UNIVERSITY OF NEW YORK  
FEDERAL WORK-STUDY TIME SHEET

Pay Period Number

9

**PLEASE READ INSTRUCTIONS BEFORE FILLING OUT THIS FORM!**

BUSINESS UNIT 

B	K	L	0	1
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 DEPARTMENT 

1	1	2	2	1
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Return Completed Time Sheet To: Financial Aid Office  
Brooklyn College  
2900 Bedford Avenue  
308 West Quad Center  
Brooklyn, New York 11210

Student's Name Smith Smart  
Last First

Pay Period Begins 09/18/16 TO 10/01/16  
Pay Period Ends

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1	2	3	4
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Social Security Number

Mr. Foster  
Supervisor's Name (Print)

\$ XX.XX Hourly Pay Rate  
Smart.Smith@bcmail.brooklyn.cuny.edu  
Student's email address  
mfoster@ffs.com  
Supervisor's email address

Foster's Financial Services  
Agency Name/College Dept. (To be used for "on-campus" position.)  
9586 Bedford Ave, Brooklyn, NY  
Agency Address  
3rd Floor  
Work Location  
(718) 123-4567  
Work Telephone Number  
X 1234  
Work Address (if different)  
Extension

Time sheet should be mailed immediately (Financial Aid Office) for the student whose work schedule ends any day prior to the last day of the pay period. Sign in blue or black ink.

Current hours available: 173

Mo/Day	IN	OUT	IN	OUT	IN	OUT	TOTAL
SUN. 09/18							0
MON. 09/19	2:00	7:00	8:00	10:30			7.5
TUE. 09/20							0
WED. 09/21							0
THU. 09/22							0
FRI. 09/23	10:00	4:00	5:00	8:00			9
SAT. 09/24	9:15	2:15					5

Total Hours for 1st Week → 21.5

Mo/Day	IN	OUT	IN	OUT	IN	OUT	TOTAL
SUN. 09/25							0
MON. 09/26							0
TUE. 09/27							0
WED. 09/28	9:00	3:00	4:00	9:00			11
THU. 09/29							0
FRI. 09/30	1:00	5:30					4.5
SAT. 10/01							0

Total Hours for 2nd Week → 15.5

I certify that:

- the record of hours worked, as submitted on this time sheet is correct.
- the hours worked did not conflict with the student's official class schedule on CUNYfirst.
- all work has been performed satisfactorily.  yes  no

mfoster  
Supervisor's signature (blue or black ink)

**ALL TIME SHEETS MUST BE MAILED**

I certify that:

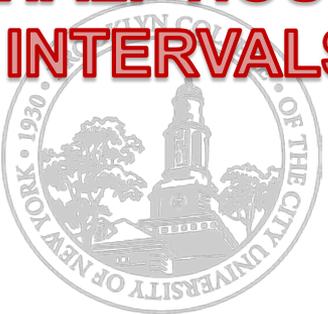
- the record of hours worked, as submitted on this time sheet is correct.
- the hours I worked did not conflict with my official class schedule on CUNYfirst.

Smart  
Student's signature (blue or black ink)

Total Hours for Pay Period  Remaining hours: **136**

**HOUR INTERVALS**

**HALF HOUR INTERVALS**



Only approved FWS site supervisor may sign. No other individual may sign for you.

**\*\* Must be signed with blue/black ink \*\***

Student must sign their own time sheet. No other individual may sign for you.

A minimum of a half hour break is required after 6 consecutive hours of work.





# Tip

- If you did not save a blank template as described at the beginning of the presentation and wish to save one from a pre-existing template, you can use the  icon located on pg. 3 as shown in the image. It will delete all the existing data on the time sheet and allow you to save a blank template.
- Be sure to rename the file and save it as a separate document.

## 2016 - 2017 Bi-Weekly Payroll for Work Study

*For student and site supervisor use*

Student's Name:

Job Location:

EMPL ID:

**SIGN UP FOR DIRECT DEPOSIT OR SCHOLAR CARD! FASTER ACCESS TO YOUR FINANCIAL AID MONEY!**

**SPECIAL NOTE:** Time sheets submitted which are not in compliance with FWS payroll procedures will be returned to the supervisor. Unsigned time sheets will be returned for appropriate signature(s). Acceptable signatures are those indicated on the 2016-2017 Federal Work Study Program Student/Employer Acknowledgements form. Late time sheets must have an official letter from the supervisor attached justifying late submission. Time sheets are now due on a Friday unless the student works on the last Saturday of the pay period or the college is closed.

FWS Payroll Assistant: Ms. Jennifer Clarke  
 Telephone #: (718) 951-5179 E-mail: jclarke@brooklyn.cuny.edu



Pay Period Number	Pay Period Dates		Available Hours	Used Hours	Timesheet Due Date	Pay Date
	Begin	End				
1	05/29/16	06/11/16			06/10/16	06/23/16
2	06/12/16	06/25/16	0.0		06/24/16	07/07/16
3	06/26/16	07/09/16	0.0		07/08/16	07/21/16
4	07/10/16	07/23/16	0.0		07/22/16	08/04/16
5	07/24/16	08/06/16	0.0		08/05/16	08/18/16
6	08/07/16	08/20/16	0.0		08/19/16	09/01/16
7	08/21/16	09/03/16	0.0		09/02/16	09/15/16
8	09/04/16	09/17/16	0.0		09/16/16	09/29/16
9	09/18/16	10/01/16	0.0		09/30/16	10/13/16
10	10/02/16	10/15/16	0.0		10/14/16	10/27/16
11	10/16/16	10/29/16	0.0		10/28/16	11/10/16
12	10/30/16	11/12/16	0.0		11/11/16	11/23/16
13	11/13/16	11/26/16	0.0		11/25/16	12/08/16
14	11/27/16	12/10/16	0.0		12/09/16	12/22/16
15	12/11/16	12/21/16	0.0		12/23/16	01/03/17



Simply repeat steps 1 through 5 for creating a time sheet template for another student.

\* If you have any questions regarding this process, you can call the FWS office at (718) 951-5178 or (718) 951-5816 or send an email to the FWS e-mail box at [fws@brooklyn.cuny.edu](mailto:fws@brooklyn.cuny.edu).