



SEMESTER TIME SHEET

All semester time sheet forms must be signed by a supervisor and emailed in PDF format to $\underline{saaboforms@jjay.cuny.edu}$.

	Name:								
	Position:								
	Month:			Y	Year:				
Week	Dates	Monday	Tuesday	Wednesday	Thursday	Friday	Total Hours		
Week 1									
Week 2									
Week 3									
Week 4									
Week 5									
	urs for Mo	nth	•	•	1	1			
	Month: Year:								
Week	Dates	Monday	Tuesday	Wednesday	Thursday		Total Hours		
Week 1							IIOUIS		
Week 2									
Week 3									
Week 4									
Week 5									
	urs for Mo	nth			I				
	Month:			Year:					
Week	Dates	Monday	Tuesday	Wednesday	Thursday	Friday	Total Hours		
Week 1									
Week 2									
Week 3									
Week 4									
Week 5									
	urs for Mor	nth							
Š	Student Sig	gnature	Date						
Ī	Supervisor	Signature		Date					

Semester Time Sheet Form Office: Student Activities Association, Inc. Business Office Last Modified: May 20, 2021





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