Frostburg State University Payroll & Employee Services Graduate Assistant Time Report

NAME:			PAY PERIOD			
DEPARTMENT:				BEGIN:		
EMPL ID:	END:					
	one of the follo D Requi X Autho	owing codes: ired duties were po orized weekend or				
	Week # 1			Week # 2		
	Date	Code	ı —	Date	Code	
Wednesday			Wednesday			
Thursday			Thursday			
Friday			Friday			
Saturday			Saturday			
Sunday			Sunday			
Monday			Monday			
Tuesday			Tuesday			
EMPLOYEE SIG			her contract for this period F	DATE:		
			ent or did NOT meet the terms notify Payroll that payment is N		pt .	
	Signature:	•	Date: nent Chair		-	