

**TIME SHEETS ARE DUE NO LATER THAN CLOSE OF THE LAST BUSINESS DAY OF THE PAY PERIOD. TIME SHEETS NOT RECEIVED WILL RESULT IN PARTICIPANT NOT BEING PAID UNTIL THE FOLLOWING PAY PERIOD. NO EXCEPTIONS.**

**SENIOR PARTICIPANT & WORKERS EMPLOYMENT PROGRAM TIME SHEET**

**Participant:** \_\_\_\_\_

**Assignment Title:** \_\_\_\_\_

**Hourly Rate**

**\$7.25**

**Name of Host Agency:** \_\_\_\_\_

**PAYROLL BEGINNING DATE**  
Wednesday October 16, 2024

**PAYROLL ENDING DATE**  
Thursday October 31, 2024

<b>DAY</b>	<b>Community Service Hours Worked</b>	<b>Federal Holiday Hours</b>	<b>Training (meeting) Hours</b>	<b>Total Paid Hours</b>	<b>Host Agency Supervisor Hours/Day</b>
Wednesday October 16, 2024					
Thursday October 17, 2024					
Friday October 18, 2024					
Saturday, October 19, 2024					
Sunday, October 20, 2024					
Monday, October 21, 2024					
Tuesday, October 22, 2024					
Wednesday, October 23, 2024					
Thursday, October 24, 2024					
Friday, October 25, 2024					
Saturday, October 26, 2024					
Sunday, October 27, 2024					
Monday, October 28, 2024					
Tuesday, October 29, 2024					
Wednesday, October 30, 2024					
Thursday, October 31, 2024					
<b>TOTALS</b>					

**The undersigned hereby certifies that the reporting information is correct for the payroll period indicated.**

**FAX NUMBER: 1-866-890-0374**

Participant Signature \_\_\_\_\_

DATE \_\_\_\_\_

Host Agency Supervisor Signature \_\_\_\_\_

DATE \_\_\_\_\_

**For Program Director Use Only**

Total hours for pay this period \_\_\_\_\_

Payment approved by: \_\_\_\_\_