

**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**  
Monday, September 16, 2024

**PAYROLL ENDING DATE**  
Monday, September 30, 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>
Monday, September 16, 2024					
Tuesday, September 17, 2024					
Wednesday, September 18, 2024					
Thursday, September 19, 2024					
Friday, September 20, 2024					
Saturday, September 21, 2024					
Sunday, September 22, 2024					
Monday, September 23, 2024					
Tuesday, September 24, 2024					
Wednesday, September 25, 2024					
Thursday, September 26, 2024					
Friday, September 27, 2024					
Saturday, September 28, 2024					
Sunday, September 29, 2024					
Monday, September 30, 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: \_\_\_\_\_