

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.

Please email to: aglover@m4a.org or fax to: 1-866-890-0374

SENIOR PARTICIPANT & WORKERS EMPLOYMENT PROGRAM TIME SHEET

Participant: _____

Assignment Title: _____

Hourly Rate _____

Name of Host Agency: _____

PAYROLL BEGINNING DATE Wednesday, September 16, 2026	PAYROLL ENDING DATE Wednesday, September 30, 2026
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DAY	Community Service Hours Worked	Federal Holiday Hours	Training (meeting) Hours	Total Paid Hours
Wednesday, September 16, 2026				
Thursday, September 17, 2026				
Friday, September 18, 2026				
Saturday, September 19, 2026				
Sunday, September 20, 2026				
Monday, September 21, 2026				
Tuesday, September 22, 2026				
Wednesday, September 23, 2026				
Thursday, September 24, 2026				
Friday, September 25, 2026				
Saturday, September 26, 2026				
Sunday, September 27, 2026				
Monday, September 28, 2026				
Tuesday, September 29, 2026				
Wednesday, September 30, 2026				
TOTALS				

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: _____

