



# University of Mississippi

DEPARTMENTAL TIME RECORD

## STUDENT EMPLOYMENT

NAME \_\_\_\_\_

INTERNAL ORDER (I.O.)  
OR COST CENTER (C.C.) # \_\_\_\_\_

DEPARTMENT  
DESCRIPTION \_\_\_\_\_

EMPLOYEE NO. \_\_\_\_\_

PAY PERIOD BEGINNING \_\_\_\_\_

AND ENDING \_\_\_\_\_

HOURLY  
RATE \_\_\_\_\_

| MONTH/DAY     | STUDENT HOURS WORKED     | STUW | WSAM | WSRG | [Grid for hours worked] |  |  |  |  |  |  |  |  |  |  |  | TOTALS |
|---------------|--------------------------|------|------|------|-------------------------|--|--|--|--|--|--|--|--|--|--|--|--------|
|               | WORK-STUDY-AMERICA READS |      |      |      | [Grid for hours worked] |  |  |  |  |  |  |  |  |  |  |  |        |
|               | WORK-STUDY-REGULAR       |      |      |      | [Grid for hours worked] |  |  |  |  |  |  |  |  |  |  |  |        |
| <b>TOTALS</b> |                          |      |      |      | [Grid for hours worked] |  |  |  |  |  |  |  |  |  |  |  |        |

UNIVERSITY OF MISSISSIPPI

I certify the hours stated above were worked and are correct.

Signature of Employee

Signature of Department Head

Time entered in CATS by Time Administrator

Time Approved in CATS by Time Administrator

This card is used by Time Administrators to record the hours worked by student employees. This record must be maintained on all student employees and signed by the employee and department head upon completion. The form is retained in the department office for three years and must be made readily available for audit. Time should be reported in hours.