

Employee Time Sheet

Employee Name: _____

Week of: _____

	Start Time	End Time	Work Summary	Total Hours
Monday (/ /)				
Tuesday (/ /)				
Wednesday (/ /)				
Thursday (/ /)				

Monday (/ /)				
Tuesday (/ /)				

Employee Time Sheet

Employee Name: _____

Week of: _____

Wednesday (/ /)				
Thursday (/ /)				
Bi-Weekly Total Hours				

Employee signature:	Date:
Supervisor signature:	Date: