|  |  |  |  |
| --- | --- | --- | --- |
|   | Employee Full Name: |  |   |
|   | Employee/Student ID: |   |   |
|   | Position #: |  |   |
|   | For the Week Ending: | mm/dd/yyyy |   |
|  |   |   |   |   |   |   |   |  |   |
|  | **Sun** | **Mon** | **Tue** | **Wed** | **Thu** | **Fri** | **Sat** |  |  |
| **MONTH** | XX | XX | XX | XX | XX | XX | XX |  | **Total Hours to Pay:** |
| # of Hoursto Pay: |   |   |   |   |   |   |   |  |  |
| Start Time(XX:XX am/pm): |   |   |   |   |   |   |   |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |

**Timesheets MUST be sent to your supervisor – they will submit to** **timesheets@trentu.ca** **– We can only process timesheets from your supervisor.**

**Please fill out 1 copy of this form, per position, per week.**

**Ensure that all hours have a start time.**

**Ensure that the “Week Ending” date is accurate, payroll weeks end on a Saturday.**

**Any errors or omissions may result in delayed processing or rejection of the timesheets.**