

OJT/SE TIMESHEET

(Employer timesheet may be used but must contain the elements on this timesheet)

Participant Name: _____ Pay Period: _____ to _____

Month/Day/Year: _____

Social Sec. # (last 4 digits): _____

OJT/SE Employer: _____ Service Provider: _____

Date	From	Lunch		To	Total Hours (minus lunch)	Date	From	Lunch		To	Total Hours (minus lunch)
		Out	In					Out	In		
Total Hours For Pay Period											

I hereby certify that this timesheet correctly reflects all time worked for the pay period indicated and that it has not been forged or altered. I understand that falsification of this documentation will result in your immediate termination from the program.

Participant Signature

Date

OJT/SE Supervisor Signature

Date