**HUNTER COLLEGE ADMINISTRATIVE ADJUNCT TIME SHEET**

**NAME**
(Please Print) LAST FIRST

SSN: ____________________________

DEPARTMENT: ____________________ PERIOD WKD ________________

**This Time Sheet is to be used for ADJUNCTS who are paid at 60% Rate**

<table>
<thead>
<tr>
<th>DAY</th>
<th>MONTH</th>
<th>DAY</th>
<th>IN</th>
<th>OUT</th>
<th>TOTAL HRS</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**WEEK ONE**

THURS

FRI

MON

TUES

WED

**WK#1 TOT**

<p>| | | | | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
</table>

**WEEK TWO**

THURS

FRI

MON

TUES

WED

**WK#2 TOT**

<p>| | | | | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
</table>

**TOT HRS.**

<p>| | | | | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
</table>

**EMPLOYEE’S SIGNATURE** ____________________________ **AUTHORIZED SIGNATURE** ____________________________

**FOR OFFICE USE ONLY:**

/hr/forms/adjuncttimesheet