

# RANGER COLLEGE – TIMESHEET

Instructor's Name: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Class: \_\_\_\_\_ RC ID #: \_\_\_\_\_

Week 1	Date	IN	OUT	IN	OUT	Daily Total	Weekly Totals
Monday							
Tuesday							
Wednesday							
Thursday							
Friday							
Saturday							
Sunday							
Week 2	Date	IN	OUT	IN	OUT	Daily Total	Weekly Totals
Monday							
Tuesday							
Wednesday							
Thursday							
Friday							
Saturday							
Sunday							
Week 3	Date	IN	OUT	IN	OUT	Daily Total	Weekly Totals
Monday							
Tuesday							
Wednesday							
Thursday							
Friday							
Saturday							
Sunday							
Week 4	Date	IN	OUT	IN	OUT	Daily Total	Weekly Totals
Monday							
Tuesday							
Wednesday							
Thursday							
Friday							
Saturday							
Sunday							
Week 5	Date	IN	OUT	IN	OUT	Daily Total	Weekly Totals
Monday							
Tuesday							
Wednesday							
Thursday							
Friday							
Saturday							
Sunday							

Total Hours for the Month:

*I certify that I have worked hours as indicated.*

Employee's Signature	Date

*I hereby certify that this time sheet is a true statement of hours worked by this instructor and that the work assigned has been performed in a satisfactory manner.*

Supervisor's Signature	Date