

Student   
Enrolled in \_\_\_\_\_ Units

# VENTURA COUNTY COMMUNITY COLLEGE DISTRICT

## CLASSIFIED HOURLY TIME SHEET

District  Ventura   
Oxnard  Work Study   
Moorpark

Name \_\_\_\_\_ Employee I.D.# \_\_\_\_\_

Address \_\_\_\_\_

Description of Work \_\_\_\_\_

(Report comp. time / OT earned in straight hours)

Month and Year Worked \_\_\_\_\_

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
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16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31
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Total Hours Worked \_\_\_\_\_ Hourly Rate \_\_\_\_\_ Amount Due \_\_\_\_\_

Comp. Time Hours Worked \_\_\_\_\_ Hourly Rate \_\_\_\_\_ Amount Due \_\_\_\_\_

Overtime Hours Worked \_\_\_\_\_ Hourly Rate \_\_\_\_\_ Amount Due \_\_\_\_\_

Account No.: \_\_\_\_\_

Account No.: \_\_\_\_\_

Account No.: \_\_\_\_\_

Account Number Verification: \_\_\_\_\_

I certify that the reported hours are correct.

Employee: \_\_\_\_\_  
Employee Signature DATE

Supervisor/Manager: \_\_\_\_\_  
DATE