



CAREER/JOB PLACEMENT CENTER (CJPC)

800 South College Drive
 Student Services, Bldg. A, Rm. A 207
 Santa Maria, CA 93454-6399
 805) 922-6966, ext. 3374/FAX (805) 347-1256
 www.hancockcollege.edu/cjpc

Lompoc Valley Center
 Student Success Center
 One Hancock Drive, Bldg. 1
 Lompoc, CA 93436
 (805) 735-3366, ext. 5374

STUDENT WORKER TIME SHEET

Student's Name (Print): _____ SSN (Last 4 Digits Only): _____
 H#: _____ Current Units: _____ Phone: _____ Signature: _____
 Payroll Period: _____ 11th Thru _____ 10th, 20 _____

Please Note: If your time sheets are late, paychecks may be delayed an entire month.

Student Worker's Procedures:

- To be eligible to work, students **must** maintain enrollment in (6) units per semester; maintain enrollment in (3) units during summer session; or have been enrolled during the preceding spring semester; or show proof of fall enrollment.
- Student workers **must** be responsible for their own time sheet(s); use black ink; not list work schedule; post sick leave date and hours in appropriate columns (sick leave eligibility will be determined by CJPC); and submit all completed/signed time sheets to CJPC by the 11th of the month unless directed otherwise.
- Student workers **must not work** more than (8) hours/day; more than (5) consecutive days; on a legal/District holiday without approval; and more than (20) hours/week.
- Calculate daily hours worked to nearest quarter hour: 15 minutes = .25; 30 minutes = .50; and 45 minutes = .75.
- Student workers **are allowed** one paid (15) minute break for every (4) consecutive hours of work. If student workers work more than (5) consecutive hours, they must take an unpaid (1/2) break.

DATE	WORK HOURS	DATE	WORK HOURS	DATE	WORK HOURS	DATE	WORK HOURS	SICK LEAVE DATE (Month/Day)	HOURS	CJPC ONLY	
										Eligible	Not Eligible
11		19		27		4				<input type="checkbox"/>	<input type="checkbox"/>
12		20		28		5				<input type="checkbox"/>	<input type="checkbox"/>
13		21		29		6				<input type="checkbox"/>	<input type="checkbox"/>
14		22		30		7				<input type="checkbox"/>	<input type="checkbox"/>
15		23		31		8				<input type="checkbox"/>	<input type="checkbox"/>
16		24		1		9				<input type="checkbox"/>	<input type="checkbox"/>
17		25		2		10				<input type="checkbox"/>	<input type="checkbox"/>
18		26		3		TOTAL		TOTAL		<input type="checkbox"/>	<input type="checkbox"/>

Supervisor's Procedures:

- Supervisors must** check appropriate funding source(s); check student worker category(s) to verify student worker's pay rate; check type(s) of worker; list and verify program/object code(s); and enforce the student worker procedures listed above.
- Supervisors **must** verify hours worked, unit requirement, and sick leave dates/hours; check time sheet legibility; calculate hours; route time sheet for grant signature (if needed); and submit all completed and signed time sheet(s) to CJPC by the 11th of the month unless directed otherwise.

FUNDING SOURCE(S):

- Categorical Funds
- Trust Funds
- Restricted Funds
- District Funds
- Grant Funds
- Federal Work Study (FWS)
- CalWORKs Work Study (CWS)

STUDENT WORKER CATEGORY:

- Student Worker 1 (\$10.50 per hour)
- Student Worker 2 (\$10.75 per hour)
- Student Worker 3 (\$11.00 per hour)
- Student Worker 4 (\$11.75 per hour)
- Student Worker 5 (\$10.50 per hour and up)

Rate: \$ _____

TYPE OF WORKER:

- Clerical
- Media Services
- Tutor
- Reader
- Children's Center
- Peer Advisor
- Cafeteria
- Cashier
- Custodial
- Grounds
- Maintenance

Other: _____

LAB ASSISTANT:

- Lab Assistant
- Facilitator
- Learning Facilitator
- Peer Educator
- Grant Tutor

PROGRAM CODE(S)	OBJECT CODE(S)						BUDGET SPLIT	
	District/Grant/Categorical		FWS		CWS		%	Hours
#1	<input type="checkbox"/> 2340	<input type="checkbox"/> 2430	<input type="checkbox"/> 2349	<input type="checkbox"/> 2439	<input type="checkbox"/> 2347	<input type="checkbox"/> 2437		
#2	<input type="checkbox"/> 2340	<input type="checkbox"/> 2430	<input type="checkbox"/> 2349	<input type="checkbox"/> 2439	<input type="checkbox"/> 2347	<input type="checkbox"/> 2437		
#3	<input type="checkbox"/> 2340	<input type="checkbox"/> 2430	<input type="checkbox"/> 2349	<input type="checkbox"/> 2439	<input type="checkbox"/> 2347	<input type="checkbox"/> 2437		

I hereby certify that the work hours specified on this time sheet were performed by the student worker.

Supervisor: _____ Signature: _____

Department/Organization: _____ Phone/Ext. #: _____

Grant/Site Supervisor (If Applicable): _____ Signature: _____

OFFICE USE ONLY Total Days Worked: _____ Sick Leave Hours: _____ AB Posted CWS%: _____ Amount: _____

Total Hours: _____ Rate: \$ _____ Total Amount: \$ _____ Verified: _____