

## **Career Institute Timesheet**

Career Mentor		Participant			nt N	Name (Last, First)			Participant Phone Number			
Please	enter	your c	lail	y <u>tota</u>	al h	ours w	<u>ork</u>	<u>ced</u> u	nder	the	e day of	the week
	Oo not w	rite time	e in	and tii	me (	out, only	the	total r	numbe	er of	hours w	orked
						ır time by			nour:			
For 15 minutes use 1/4			or .25 For			30 minutes use ½ or .5			For 45 minutes use ¾ or .75			
	I	Do not	exc	eed 8	ho	urs per d	day	40 h	ours p	er v	week.	
Dates:	ites: 11/8/24		24	11/10/24		11/11/24	11	/12/24	11/13/24		11/14/24	
Total	FRI	SAT		SUN	l	MON	Т	UES	WE	)	THUR	Total Hours
hours vorked:												
5.4	44/45/04	4444	V0.4	44/47	10.4	444004		4/40/04	44/04	\ <u></u>	44/04/04	
Dates: Total	11/15/24 Fri	4 11/16/24 SAT		11/17/24 SUN		11/18/24 MON	11/19/24 TUES		11/20/24 WED		11/21/24 THUR	Total Hours
hours		JAI		301	<u> </u>	IVIOIN		ULS	VVLL	,	IIIOK	Total Hours
vorked:												
				T	OT.	AL HOU	RS	FOR	PAY	PEI	RIOD:	
upervis	or Evalu	ation		- `								
		Excellent	cellent Acce		Nee	eds Improvement		Unacc	Unacceptable Cor		nments:	
Attendance												
Appeara	ince											
Attitude	_											
Ambition Accountability												
Apprecia												
<u> </u>												24.202
articipa	nt Signa	ture		Da	te	Su	per	visor S	Signat	ure		Date
Time	abaata n	auat bay		aamal	oto d	Cupania		Evalua	ation o	ו המי		by
						•	sor	⊏vaiua	ation a	ına ı	be <b>signed</b>	Бу
narti					DI U	JUJJIII.						
						Supervis	sor	Evalua	ation a	ınd l	oe <b>signed</b>	by

• Time claimed 30 days past due date, will *not* be eligible for payment.