



# Career Institute Timesheet

Check the program you are enrolled in:

CYEP    CSEP    Hinkley

\_\_\_\_\_  
Career Mentor

\_\_\_\_\_  
Participant Name (Last, First)

\_\_\_\_\_  
Participant Phone Number

**Please enter your daily total hours worked under the day of the week.**

Do not write time in and time out, only the total number of hours worked

Fill out your time by quarter hour:

For 15 minutes use ¼ or .25

For 30 minutes use ½ or .5

For 45 minutes use ¾ or .75

**Do not exceed 8 hours per day, 40 hours per week.**

|                            |          |         |         |         |         |         |         |             |
|----------------------------|----------|---------|---------|---------|---------|---------|---------|-------------|
| <b>Dates:</b>              | 10/31/25 | 11/1/25 | 11/2/25 | 11/3/25 | 11/4/25 | 11/5/25 | 11/6/25 |             |
| <b>Total hours worked:</b> | FRI      | SAT     | SUN     | MON     | TUES    | WED     | THUR    | Total Hours |
|                            |          |         |         |         |         |         |         |             |

|                            |         |         |         |          |          |          |          |             |
|----------------------------|---------|---------|---------|----------|----------|----------|----------|-------------|
| <b>Dates:</b>              | 11/7/25 | 11/8/25 | 11/9/25 | 11/10/25 | 11/11/25 | 11/12/25 | 11/13/25 |             |
| <b>Total hours worked:</b> | Fri     | SAT     | SUN     | MON      | TUES     | WED      | THUR     | Total Hours |
|                            |         |         |         |          |          |          |          |             |

**TOTAL HOURS FOR PAY PERIOD:**

## Supervisor Evaluation

|                       | Excellent | Acceptable | Needs Improvement | Unacceptable | Comments: |
|-----------------------|-----------|------------|-------------------|--------------|-----------|
| <b>Attendance</b>     |           |            |                   |              |           |
| <b>Appearance</b>     |           |            |                   |              |           |
| <b>Attitude</b>       |           |            |                   |              |           |
| <b>Ambition</b>       |           |            |                   |              |           |
| <b>Accountability</b> |           |            |                   |              |           |
| <b>Appreciation</b>   |           |            |                   |              |           |

23.2025

\_\_\_\_\_  
Participant Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Supervisor Signature

\_\_\_\_\_  
Date

- Timesheets must have a completed **Supervisor Evaluation** and be **signed by participant *and* supervisor** for processing.
- Email your completed timesheet to: [Payroll.cinow@gmail.com](mailto:Payroll.cinow@gmail.com) and your Career Mentor/Job Coach on the last day of the pay period by 5 p.m.
- Hours that are not submitted by the Timesheet Due Date, will need to have approval for payment. Therefore, payment will be delayed.
- Time claimed 30 days past due date, will *not* be eligible for payment.