CUESTA COLLEGE
ACADEMIC MONTHLY TIME SHEET

2/3 LAB Assignment

Name: _____ Position #_____

Banner ID: _____

For Month Ending:

DATE	LOCATION	SUBJECT	HOURS OF SERVICE FROM	HOURS OF SERVICE TO	HOURS	PROJECT	WORK PERFORMED

Account Number

Total Hours: 0 **Rate:** **Total Earnings:** $ 0.00

_____ - _____ - _____ - _____ - _____

Earning Code: _____

REQUIRED SIGNATURES:

_____ Division Chair/Director

_____ Date

_____ Dean of Instruction

_____ Date

_____ Employee

_____ Date