CUESTA COLLEGE
ACADEMIC MONTHLY TIME SHEET

NAME:

ADDRESS:

BANNER ID # FOR MONTH ENDING:

DATE	LOCATION	SUBJECT	HOURS OF SERVICE FROM	HOURS OF SERVICE TO	TOTAL HOURS	2/3 LAB RATE PER HOUR	TOTAL	DESCRIPTION

TOTAL EARNED $ _____

12262-5005-2431-490100-6301

REQUIRED SIGNATURES:

_____ Division Chair/Director

_____ Date

_____ Dean of Humanities

_____ Date

_____ Employee

_____ Date