

SOUTHERN ARKANSAS UNIVERSITY PAYROLL AUTHORIZATION

STUDENT NAME: (Last) **Gautam** (First) **Ajaya**

SOCIAL SECURITY # **835-46-3477**

DEPARTMENT: **Bruce Center**

ACCOUNT NUMBER: **20-5115-5140**

REPORTING PERIOD: FROM: **4/23/2017** TO: **5/6/2017** COLLEGE WORK STUDY REGULAR STUDENT LABOR

WEEKLY TIME PERIOD	S	M	T	W	T	F	S	TOTAL
04/23-04/29	5.00					4.00	4.00	13.00
04/30-05/06	5.00			5.00				10.00
								0.00
								0.00
								0.00
TOTAL HOURS WORKED								23.00
GRADUATE ASSISTANT PUT TOTAL PAYMENT AMOUNT IN TOTAL FIELD →								



RATE **\$ 8.50**
 GROSS **\$ 195.50**
 G/A TOTAL GROSS **\$ -**

STUDENT SIGNATURE

I certify that this student worked the number of hours stated on an approved project and performed the assigned job in a satisfactory manner.

NOTICE: UNSIGNED TIMESHEETS THAT ARE SUBMITTED FOR PAYMENT WILL NOT BE PROCESSED AND WILL BE RETURNED TO THE DEPARTMENT FOR SIGNATURE, DELAYING PAYMENT UNTIL THE NEXT PAYROLL CYCLE. NO CHECKS WILL BE PROCESSED WITHOUT SUBMITTAL OF A STATE AND FEDERAL WITHHOLDING FORM

SUPERVISOR SIGNATURE

Kandice Herron
 SUPERVISOR NAME - PRINTED

5/5/2017
 DATE