

Career Institute Timesheet

Career Mentor		Participant Name (Last, First)				Participant Phone Number		
Please	enter	your c	laily <u>tota</u>	al hours w	<u>orked</u> ι	under	the day of	the week
	Do not w	rite time	e in and ti	me out, only	the total	numbe	r of hours w	orked
For 15 i	minutes u	se ¼ or .2		your time b for 30 minutes u		hour:	For 45 minutes	s use ¾ or .75
		Do not	exceed 8	hours per	day, 40 h	ours p	er week.	
Dates:	6/20/25	6/21/2	25 6/22/2	5 6/23/25	6/24/25	6/25/2	5 6/26/25	
Total	FRI	SAT	SUN	I MON	TUES	WED	THUR	Total Hours
hours								
orked:			T	OTAL HOU	IRS FOF	R PAY	PERIOD:	
	or Evalu							
upervise		lation Excellent	Acceptable	OTAL HOU		R PAY	PERIOD:	
upervise Attenda	nce							
uperviso Attendar Appeara	nce							
upervise Attendar Appeara Attitude	nce							
upervise Attendar Appeara Attitude Ambition Account	nce ance							
uperviso Attendar Appeara Attitude Ambition	nce ance n							
upervise Attendar Appeara Attitude Ambitio	nce ance n							13.202

- 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.