

St. Thomas University -Time Sheets

Please print _____
Name

Payperiod: January 4, 2025 to January 17, 2025

Pay Date: January 24, 2025

		Time In-AM	Time Out-AM	Time In-PM	Time Out-PM	TOTAL HOURS
Saturday	Jan 4/25					
Sunday	Jan 5/25					
Monday	Jan 6/25					
Tuesday	Jan 7/25					
Wednesday	Jan 8/25					
Thursday	Jan 9/25					
Friday	Jan 10/25					
Saturday	Jan 11/25					
Sunday	Jan 12/25					
Monday	Jan 13/25					
Tuesday	Jan 14/25					
Wednesday	Jan 15/25					
Thursday	Jan 16/25					
Friday	Jan 17/25					
TOTAL HOURS						

In order to meet the payroll cut-off for this payperiod, your time sheet MUST be received by the Payroll Officer (GMH103) no later than 10:00 am on the Monday following the end of this payperiod.

_____	\$ _____ X _____ =	\$ _____	_____ - _____ - _____ - _____
Budget Number	Hourly Rate * * (Hourly rate includes 4% vacation pay)	Total Deposit	Top-Up Budget Number (if applicable)
	Total Hours		

_____	_____	_____
Department	Position Worked	Supervisor - please print and sign name
Department Chair / Director Authorization		

St. Thomas University - Time Sheets

Please print _____

Name

Payperiod: January 18, 2025 to January 31, 2025

Pay Date: February 7, 2025

		Time In-AM	Time Out-AM	Time In-PM	Time Out-PM	TOTAL HOURS
Saturday	Jan 18/25					
Sunday	Jan 19/25					
Monday	Jan 20/25					
Tuesday	Jan 21/25					
Wednesday	Jan 22/25					
Thursday	Jan 23/25					
Friday	Jan 24/25					
Saturday	Jan 25/25					
Sunday	Jan 26/25					
Monday	Jan 27/25					
Tuesday	Jan 28/25					
Wednesday	Jan 29/25					
Thursday	Jan 30/25					
Friday	Jan 31/25					
TOTAL HOURS						

In order to meet the payroll cut-off for this payperiod, your time sheet MUST be received by the Payroll Officer (GMH103) no later than 10:00 am on the Monday following the end of this payperiod.

_____ Budget Number	\$	X	=	\$	_____ Top-Up Budget Number (if applicable)
	Hourly Rate				Total Deposit
_____ Department	*				Supervisor - please print and sign name
	* (Hourly rate includes 4% vacation pay)				_____ Department Chair / Director Authorization
_____ Position Worked					

St. Thomas University - Time Sheets

Please print _____
Name

Payperiod: February 1, 2025 to February 14, 2025

Pay Date: February 21, 2025

		Time In-AM	Time Out-AM	Time In-PM	Time Out-PM	TOTAL HOURS
Saturday	Feb 1/25					
Sunday	Feb 2/25					
Monday	Feb 3/25					
Tuesday	Feb 4/25					
Wednesday	Feb 5/25					
Thursday	Feb 6/25					
Friday	Feb 7/25					
Saturday	Feb 8/25					
Sunday	Feb 9/25					
Monday	Feb 10/25					
Tuesday	Feb 11/25					
Wednesday	Feb 12/25					
Thursday	Feb 13/25					
Friday	Feb 14/25					
TOTAL HOURS						

In order to meet the payroll cut-off for this payperiod, your time sheet MUST be received by the Payroll Officer (GMH103) no later than 10:00 am on the Monday following the end of this payperiod.

_____ Budget Number	\$	X	=	\$	_____ Top-Up Budget Number (if applicable)
	Hourly Rate				
	*				
		Total Hours		Total Deposit	
		* (Hourly rate includes 4% vacation pay)			

_____ Department	_____ Position Worked	_____ Supervisor - please print and sign name
		_____ Department Chair / Director Authorization

St. Thomas University - Time Sheets

Please print _____

Payperiod: February 15, 2025 to February 28, 2025

Name

Pay Date: March 7, 2025

		Time In-AM	Time Out-AM	Time In-PM	Time Out-PM	TOTAL HOURS	
Saturday	Feb 15/25						
Sunday	Feb 16/25						
Monday	Feb 17/25	NB FAMILY DAY - UNIVERSITY CLOSED					
Tuesday	Feb 18/25						
Wednesday	Feb 19/25						
Thursday	Feb 20/25						
Friday	Feb 21/25						
Saturday	Feb 22/25						
Sunday	Feb 23/25						
Monday	Feb 24/25						
Tuesday	Feb 25/25						
Wednesday	Feb 26/25						
Thursday	Feb 27/25						
Friday	Feb 28/25						
TOTAL HOURS							

In order to meet the payroll cut-off for this payperiod, your time sheet MUST be received by the Payroll Officer (GMH103) no later than 10:00 am on the Monday following the end of this payperiod.

_____ - ____ - _____	\$ _____ X	_____ =	\$ _____	_____ - ____ - _____
Budget Number	Hourly Rate	Total Hours	Total Deposit	Top-Up Budget Number (if applicable)
	* (Hourly rate includes 4% vacation pay)			

Department	Position Worked	Supervisor - please print and sign name
		Department Chair / Director Authorization

St. Thomas University - Time Sheets

Please print _____

Payperiod: March 1, 2025 to March 14, 2025

Name

Pay date: March 21, 2025

		Time In-AM	Time Out-AM	Time In-PM	Time Out-PM	TOTAL HOURS
Saturday	Mar 1/25					
Sunday	Mar 2/25					
Monday	Mar 3/25	READING WEEK				
Tuesday	Mar 4/25	READING WEEK				
Wednesday	Mar 5/25	READING WEEK				
Thursday	Mar 6/25	READING WEEK				
Friday	Mar 7/25	READING WEEK				
Saturday	Mar 8/25					
Sunday	Mar 9/25					
Monday	Mar 10/25					
Tuesday	Mar 11/25					
Wednesday	Mar 12/25					
Thursday	Mar 13/25					
Friday	Mar 14/25					
TOTAL HOURS						

In order to meet the payroll cut-off for this payperiod, your time sheet MUST be received by the Payroll Officer (GMH103) no later than 10:00 am on the Monday following the end of this payperiod.

_____	\$	X	=	\$	_____
Budget Number		Hourly Rate		Total Deposit	Top-Up Budget Number (if applicable)
		*			
		* (Hourly rate includes 4% vacation pay)			

Department	Position Worked	Supervisor - please print and sign name
		Department Chair / Director Authorization

St. Thomas University -Time Sheets

Please print _____

Name

Payperiod: March 15, 2025 to March 28, 2025

Pay Date: April 4, 2025

		Time In-AM	Time Out-AM	Time In-PM	Time Out-PM	TOTAL HOURS
Saturday	Mar 15/25					
Sunday	Mar 16/25					
Monday	Mar 17/25					
Tuesday	Mar 18/25					
Wednesday	Mar 19/25					
Thursday	Mar 20/25					
Friday	Mar 21/25					
Saturday	Mar 22/25					
Sunday	Mar 23/25					
Monday	Mar 24/25					
Tuesday	Mar 25/25					
Wednesday	Mar 26/25					
Thursday	Mar 27/25					
Friday	Mar 28/25					
TOTAL HOURS						

In order to meet the payroll cut-off for this payperiod, your time sheet MUST be received by the Payroll Officer (GMH103) no later than 10:00 am on the Monday following the end of this payperiod.

_____	\$ _____ X _____ =	_____	\$ _____	_____ - _____ - _____ - _____
Budget Number	Hourly Rate	Total Hours	Total Deposit	Top-Up Budget Number (if applicable)
	*	* (Hourly rate includes 4% vacation pay)		

Department	Position Worked	Supervisor - please print and sign name
		Department Chair / Director Authorization

St. Thomas University - Time Sheets

Please print _____
Name

Payperiod: March 29, 2025 to April 11, 2025

Pay date: April 18, 2025

		Time In-AM	Time Out-AM	Time In-PM	Time Out-PM	TOTAL HOURS
Saturday	Mar 29/25					
Sunday	Mar 30/25					
Monday	Mar 31/25					
Tuesday	Apr 1/25					
Wednesday	Apr 2/25					
Thursday	Apr 3/25					
Friday	Apr 4/25					
Saturday	Apr 5/25					
Sunday	Apr 6/25					
Monday	Apr 7/25					
Tuesday	Apr 8/25					
Wednesday	Apr 9/25					
Thursday	Apr 10/25					
Friday	Apr 11/25					
TOTAL HOURS						

In order to meet the payroll cut-off for this payperiod, your time sheet MUST be received by the Payroll Officer (GMH103) no later than 10:00 am on the Monday following the end of this payperiod.

_____ - ____ - _____ - _____ \$ _____ X _____ = \$ _____ - ____ - _____ - _____

Budget Number Hourly Rate
 * Total Hours Total Deposit Top-Up Budget Number (if applicable)
 * (Hourly rate includes 4% vacation pay)

_____ Department _____ Position Worked _____ Supervisor - please print and sign name

_____ Department Chair / Director Authorization

St. Thomas University - Time Sheets

Please print _____
Name

Payperiod: April 12, 2025 to April 25, 2025

Pay Date: May 2, 2025

		Time In-AM	Time Out-AM	Time In-PM	Time Out-PM	TOTAL HOURS	
Saturday	Apr 12/25						
Sunday	Apr 13/25						
Monday	Apr 14/25						
Tuesday	Apr 15/25						
Wednesday	Apr 16/25						
Thursday	Apr 17/25						
Friday	Apr 18/25	GOOD FRIDAY - UNIVERSITY CLOSED					
Saturday	Apr 19/25						
Sunday	Apr 20/25						
Monday	Apr 21/25	EASTER MONDAY - UNIVERSITY CLOSED					
Tuesday	Apr 22/25						
Wednesday	Apr 23/25						
Thursday	Apr 24/25						
Friday	Apr 25/25						
TOTAL HOURS							

In order to meet the payroll cut-off for this payperiod, your time sheet MUST be received by the Payroll Officer (GMH103) no later than 10:00 am on the Monday following the end of this payperiod.

_____ - ____ - _____ - _____ \$ _____ X _____ = \$ _____ - ____ - _____ - _____

Budget Number Hourly Rate
 * Total Hours Total Deposit Top-Up Budget Number (if applicable)
 * (Hourly rate includes 4% vacation pay)

 Department Position Worked Supervisor - please print and sign name

 Department Chair / Director Authorization

St. Thomas University - Time Sheets

Please print _____
Name

Payperiod: April 26, 2025 to May 9, 2025

Pay Date: May 16, 2025

		Time In-AM	Time Out-AM	Time In-PM	Time Out-PM	TOTAL HOURS
Saturday	Apr 26/25					
Sunday	Apr 27/25					
Monday	Apr 28/25					
Tuesday	Apr 29/25					
Wednesday	Apr 30/25					
Thursday	May 1/25					
Friday	May 2/25					
Saturday	May 3/25					
Sunday	May 4/25					
Monday	May 5/25					
Tuesday	May 6/25					
Wednesday	May 7/25					
Thursday	May 8/25					
Friday	May 9/25					
TOTAL HOURS						

In order to meet the payroll cut-off for this payperiod, your time sheet MUST be received by the Payroll Officer (GMH103) no later than 10:00 am on the Monday following the end of this payperiod.

_____ - ____ - _____ - _____ \$ _____ X _____ = \$ _____ _____ - ____ - _____ - _____

Budget Number Hourly Rate
 * Total Hours Total Deposit Top-Up Budget Number (if applicable)
 * (Hourly rate includes 4% vacation pay)

 Department Position Worked Supervisor - please print and sign name

 Department Chair / Director Authorization

St. Thomas University - Time Sheets

Please print _____
Name

Payperiod: May 10, 2025 to May 23, 2025
Pay date: May 30, 2025

		Time In-AM	Time Out-AM	Time In-PM	Time Out-PM	TOTAL HOURS
Saturday	May 10/25					
Sunday	May 11/25					
Monday	May 12/25					
Tuesday	May 13/25					
Wednesday	May 14/25					
Thursday	May 15/25					
Friday	May 16/25					
Saturday	May 17/25					
Sunday	May 18/25					
Monday	May 19/25	VICTORIA DAY - UNIVERSITY CLOSED				
Tuesday	May 20/25					
Wednesday	May 21/25					
Thursday	May 22/25					
Friday	May 23/25					
TOTAL HOURS						

In order to meet the payroll cut-off for this payperiod, your time sheet MUST be received by the Payroll Officer (GMH103) no later than 10:00 am on the Monday following the end of this payperiod.

_____ - ____ - _____ - _____	\$ _____ X _____ =	\$ _____	_____ - ____ - _____ - _____
Budget Number	Hourly Rate * <i>*(Hourly rate includes 4% vacation pay)</i>	Total Hours	Total Deposit Top-Up Budget Number (if applicable)

_____	_____	_____
Department	Position Worked	Supervisor - please print and sign name
Department Chair / Director Authorization		