Miami Dade College

Timesheet Data Entry Request

To be routed for approval as follows:

Supervisor _____

Budget Manager _____

To be routed for data entry/completion:

Department Timekeeper _____

Exception

Indicate the source of the exception request:

WORKED OFF CAMPUS ☐

Event Name: _____

Location: _____

MISSED PUNCH ☐

Day *(Monday, Tuesday…)*	**Date**	**Time In**	**Time Out**	**Time In**	**Time Out**

Under penalties of perjury, I declare that I have read the foregoing Timesheet Data Entry Request and the facts stated in it, including time entries, are true.

Employee Name ***Empl_ID*** ***Employee Signature*** ***Date***

Supervisor Name ***Supervisor Signature/Approval*** ***Date***

Created 6/1/2018