**Company Name**

Weekly Time Sheet

|  |  |  |
| --- | --- | --- |
| Employee Name:  | Employee ID:  | Department:  |
| Week Starting:  | Week Ending:  | Manager:  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Morning | Afternoon | Approved | **FOR OFFICE USE ONLY** |
|  | IN | OUT | IN | OUT | REG HOURS | OVERTIME |
| Monday |   |   |   |   |   |   |   |
| Tuesday |   |   |   |   |   |   |   |
| Wednesday |   |   |   |   |   |   |   |
| Thursday |   |   |   |   |   |   |   |
| Friday |   |   |   |   |   |   |   |
| Saturday |   |   |   |   |   |   |   |
| Sunday |   |   |   |   |   |   |   |
|  |  |  |  |  | **TOTALS** |   |   |

**\*NOTE**: All overtime must be pre-approved.

|  |  |  |  |
| --- | --- | --- | --- |
|   |   |   |   |

EMPLOYEE’S SIGNATURE DATE SUPERVISOR’S SIGNATURE DATE

Entered in payroll by:

Date:

