

# Creighton University Student employee Daily sign IN/OUT sheet

**DEPARTMENT NAME :** \_\_\_\_\_ **SUPERVISOR:** \_\_\_\_\_ **PAY PERIOD\_**     **year 20\_\_**

ALL STUDENTS MUST SIGN THEIR NAME AND TIME IN/OUT EACH TIME THEY WORK IN THE DAILY BOXES BELOW.

<b>WEEK ONE</b>	SATURDAY Date:	SUNDAY Date:	MONDAY Date:	TUESDAY Date:	WEDNESDAY Date:	THURSDAY Date:	FRIDAY Date:
<b>WEEK TWO</b>	SATURDAY Date:	SUNDAY Date:	MONDAY Date:	TUESDAY Date:	WEDNESDAY Date:	THURSDAY Date:	FRIDAY Date: