



(715)378-2263 - www.solonk12.net

**SCHOOL DISTRICT OF SOLON SPRINGS**

8993 E Baldwin Avenue - Solon Springs, WI 54873

### School To Work Students Timesheet

Students Name: \_\_\_\_\_

Week Ending Date: \_\_\_\_\_

Day/Date	Start Time	End Time	Daily Hours

Total Hours: \_\_\_\_\_

Week Ending Date: \_\_\_\_\_

Day/Date	Start Time	End Time	Daily Hours

I certify the above hours are true accounting of my workweek.

Total Hours: \_\_\_\_\_

\_\_\_\_\_  
Student Signature Date: \_\_\_\_\_

\_\_\_\_\_  
Supervisor Signature Date: \_\_\_\_\_

For Office Use Only: Total Hours: \_\_\_\_\_ Hourly Rate: \_\_\_\_\_ Total Amount Paid: \_\_\_\_\_