

**Time Sheet Signature
Authorization Form**
(for the Student Employment Program)

Name of Department: _____

Budget Code (10-Digit): _____

The people listed below are authorized to sign *Student Time Sheets*.
This authorization remains in effect until you notify Payroll of any changes.

Printed Name: _____ Signature: _____

Printed Name: _____ Signature: _____

Printed Name: _____ Signature: _____

Printed Name: _____ Signature: _____

Printed Name: _____ Signature: _____

Printed Name: _____ Signature: _____

Printed Name: _____ Signature: _____

Printed Name: _____ Signature: _____

Supervisor Printed Name: _____

Supervisor Signature: _____

Please return this form to Amy Flaherty in the Payroll office. Thank you.