# McGill University - Academic Casual Employee Time Sheet

Top portion to be completed by the casual employee and submitted to supervisor.  Bottom portion to be completed by the department/unit.

Name (Last & First) _____ McGill ID #_____
    PLEASE PRINT CLEARLY

Department/Unit: _____ SIN # (optional) _____

Workweek: From Sunday (date): _____  To  Saturday (date): _____

Information applies to 1 week, where a week for EI purposes starts on Sunday and finishes on Saturday

| Project/Task identifier (where applicable) | Day of the week | Time In | Time Out | Time off (e.g. lunch hour) | Total Hours | Comment and or general nature of work performed |
|---|---|---|---|---|---|---|
| To be completed in pen by the casual employee | | | | | | |
| | Sunday | | | | | |
| | Monday | | | | | |
| | Tuesday | | | | | |
| | Wednesday | | | | | |
| | Thursday | | | | | |
| | Friday | | | | | |
| | Saturday | | | | | |
| | | | | | | Total hours |
| | | | | | | Hourly rate |
| | | | | | | Total (excludes 4% vacation pay) |

_____
**Casual employee's Signature and Date signed**

**This Timesheet must be submitted no later than Monday, 12 noon of the week following your period of employment.**

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**Departmental Office use only.     (Do not forward to the Payroll Office)**

**Pay date:**
Thursday _____

| FUND | ORGANIZATION | ACCOUNT (6) | PROGRAM | ACTIVITY | LOCATION |
|---|---|---|---|---|---|
| | | | | | |

_____     _____     _____
FFM/PI or delegate: Print name          FFM McGill ID (required)          FFM/PI or delegate: signature & date

_____
Delegate ID (if applicable)

_____
Supervisor/Manager's:  signature and date

_____
Entered into POPS/Web: signature & date

_____
Reviewed/Approved POPS/Web data: signature & date

**Payment type from drop down list:**
Graduate Student Assistant
Graduate Student Research Assistant
Undergraduate Student  Assistant
Undergraduate Student Research Assistant
Post Doctoral Fellow
Casual Payment - Academic Staff
Native Indian Working on Reservation
Invigilator
Casual Payment - Research Assistant
Casual Payment - Research Associate

**Enter Work Category code:** [    ]
A-Student related work
W-Post Doctoral
B-Course related (non teaching)
X-Course related credits _____
L-Course related (credits elsewhere)
G-Guest Lecturer
F-Course Lect/extra course load
O-Other academic/research related

Work Study/Summer Career Placement Program
No:_____

*The original signed form MUST be retained in the department/unit for 7 years at a minimum, as supporting documentation in the event of an internal/external audit*