Name   Position

	Date	In	Out	In	Out	Hours
Monday						
Tuesday						
Wednesday						
Thursday						
Friday						
					Total Hours	

	Date	In	Out	In	Out	Hours
Monday						
Tuesday						
Wednesday						
Thursday						
Friday						
					Total Hours	

	Date	In	Out	In	Out	Hours
Monday						
Tuesday						
Wednesday						
Thursday						
Friday						
					Total Hours	

	Date	In	Out	In	Out	Hours
Monday						
Tuesday						
Wednesday						
Thursday						
Friday						
					Total Hours	

	Date	In	Out	In	Out	Hours
Monday						
Tuesday						
Wednesday						
Thursday						
Friday						
					Total Hours	

Employee Signature   Supervisor Signature