



Adjunct Professional Development Timesheet

****** This rate is to be paid to part-time faculty for all work or attendance not directly related to assigned student classes. Rate will apply to attendance in conferences, meetings, seminars, workshops and professional development events classified as "required" and pre-approved by the relevant Department Chair.

Employee Name: _____ ID #: _____

Department Name: _____ Campus: _____ Org: _____

Pay Period: _____ ****** Approved Hourly Rate: \$20 _____

Date	Work Performed or Event Attended	Time In	Time Out	Daily Total
TOTAL HOURS:				

By signing below, you are indicating that the hours submitted are true and correct.

Employee Signature: _____ Date: _____

Supervisor Signature: _____ Date: _____

Supervisor (Printed): _____ Extension: _____