



**Payroll Time Entry Form
Gustavus Adolphus College
Missed Hours – Previous Payroll**

Date _____

Student Name _____ ID # _____

Department _____

Time Entry Breakdown

Date _____ Hours Worked _____ Date _____ Hours Worked _____

Date _____ Hours Worked _____ Date _____ Hours Worked _____

Date _____ Hours Worked _____ Date _____ Hours Worked _____

Date _____ Hours Worked _____ Date _____ Hours Worked _____

Date _____ Hours Worked _____ Date _____ Hours Worked _____

Date _____ Hours Worked _____ Date _____ Hours Worked _____

Date _____ Hours Worked _____ Date _____ Hours Worked _____

Date _____ Hours Worked _____ Date _____ Hours Worked _____

Date _____ Hours Worked _____ Date _____ Hours Worked _____

Date _____ Hours Worked _____ Date _____ Hours Worked _____

Total Missing Hours _____

(Will be paid on next scheduled student payroll)

Supervisor Signature _____

(Required)

Completed paper copies or electronic submissions should be returned to the Finance/Payroll Department. Completed forms and any questions can be directed to Payroll Administrator Renae Stierlen rstierle@gustavus.edu at extension 6314, or to Director, Payroll and Finance Operations, Barbara Lundgren blundgre@gustavus.edu at extension 7505.