NUDAR Office of Academic Services & Student Development: N'CAT Tutor Program
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ATTN: Shea'na Grigsby

OFFICE USE ONLY
Date Rec'd & Initialed: _____
Date App'd ETES/Sub Mo: _____

Tutor Time Sheet

Name:_____ Paid: Bi-weekly or Monthly Phone Number:_____

Tutor's Employee ID #:_____ Time Sheet Covers Pay Period Dates: _____ (start) to _____ (end)

All tutorial appointments must be documented. Time sheets not submitted by the due date may result in delayed payment.

DATE	STUDENT'S NAME/ TUTORING TYPE (e.g.: drop-in, LT)	SUBJECT or COURSE TUTORED	TIME IN/OUT		TOTAL HOURS	FOR INDIVIDUAL TUTORING		
			From AM/PM	To AM/PM		Location of Tutorial Session	No Show?	Student-Athlete's Signature (confirm hours tutored)

I certify these hours are correct: **X**_____ **Total Hours Tutored:** ☐

(Tutor Signature)

Last update: 08/25/08
spg: Tutor_Time_Sheet