SAN FRANCISCO STATE UNIVERSITY

orsp Office of Research and Sponsored Programs

SPECIAL CONSULTANT TIME REPORT

255	655	4660	
AGENCY	**UNIT**	**CLASS**	**SERIAL**

PROJECT ID#: _____

NAME: _____ **SSN#:** _____ **PAY PERIOD:** _____
LAST FIRST

DATES	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	**TOTAL DAYS WORKED**
DAYS WORKED																																

INSTRUCTIONS FOR COMPLETING THE SPECIAL CONSULTANT TIME REPORT:

1) Pay periods vary. Please refer to the **Special Consultant Pay Day Schedule** for dates included in the current pay period.
2) Special Consultants are paid **in full day increments ONLY**.
3) For each day worked enter a **W in the box** that corresponds to the date given above each row. **Do not enter hours.**
4) List the total number of days worked in the Total Days Worked Box.
5) Make sure to enter the **Eight (8) Digit Grant Project Number on the second line of the timesheet**. (Check with your project director/supervisor to obtain the correct grant project number).
6) Sign the timesheet and forward to your project director/supervisor for signature.
7) Time Reports should be submitted to ORSP (ADM 471) **no later than the date indicated on the ORSP Payday Schedule (see ORSP Payday Schedule on the ORSP website at http://www.sfsu.edu/~orspwww/_personnel/payschedorsp806.doc.**
8) Pay checks are distributed for Special Consultants according to the ORSP Payday Schedule.
9) Pay checks will be available for pick-up according to the ORSP Payday Schedule. If a current mail authorization form is on file in the ORSP Personnel Office, checks will be mailed. Please report address changes immediately to ORSP.

EMPLOYEE SIGNATURE: _____ PHONE: #_____ DATE: _____

PROJECT DIRECTOR/SUPERVISOR APPROVAL: _____ PHONE: _____

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Victoria Narkewicz - Personnel Manager

SPCTIMESHEET/10/2005/vn

Daily Rate: _____ ETRAC#: _____