Yuba Community College District-Payroll Department

Mouse, Minnie

Print: Last First

Student

Or temporary

X | 10th | EOM

123456

Colleague ID Number

April 2026

Month/Year

Date	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Number of Hours Worked		Sick Time 4 hrs.													

Example

16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31

Employee's Signature Minnie Mouse Date 04/27/2026 **Department/Job Title Student Worker/Library

Earn Type		**GL#	
		Position ID	
Earn Type		GL#	
		Position ID	
Earn Type		GL#	
		Position ID	

To claim sick leave, please complete a regular time sheet and indicate sick time and # of hours.

This section to be completed & calculated by Payroll Department.

Hours Worked	Pay Rate	Total (Hours X Pay Rate)

Total $