Proof of Employment Time Sheet

Name:				Due Date:				
Company Name:				<u>Circle Which Applies:</u> W-2 Employee 1099 Employee Self-Employed				
Week 1				Week 2				
Week Starting:				Week Starting:				
Week Ending:				Week	Week Ending:			
Day:	Date:	Time-in:	Time-out:	Day:	Date:	Time-in:	Time-out:	
Monday				Monday				
Tuesday				Tuesday				
Wednesday				Wednesday				
Thursday				Thursday				
Friday				Friday				
Saturday				Saturday				
Sunday				Sunday				
EXTRA				EXTRA				
EXTRA				EXTRA				
EXTRA				EXTRA				
EXTRA				EXTRA				
Total Hou	rs for Week 1:			Total Hour	s for Week 2:			
-								
Week 3					Week 4			
Week Starting:				Week Starting:				
Week	Week Ending:			Week	Week Ending:			
Day:	Date:	Time-in:	Time-out:	Day:	Date:	Time-in:	Time-out:	
Monday				Monday				
Tuesday				Tuesday				
Wednesday				Wednesday				
Thursday				Thursday				
Friday				Friday				
Saturday				Saturday				
Sunday				Sunday				
EXTRA				EXTRA				
EXTRA				EXTRA				
EXTRA				EXTRA				
EXTRA				EXTRA				
Total Hou	rs for Week 3:			Total Hour	s for Week 4:			
either a W-2 status to the lemployment Court each m	employee, 1099 DUI Court offic at any time upo nonth will result	employee, or we within 72 ho on request of the t in a sanction f	se and correct, undo self-employed. I understand the DUI Court staff. From the Court, and	nderstand that I m nat I may be requin I further understan I that failure to pro	ust report any ched to provide fund that failure to ovide truthful into	nanges to my e rther document provide this i	employment ntation of my nformation to the	

Date:

Participant Signature: