

# AUXILIARY SERVICES TIMESHEET

UC Davis • Student Disability Center • 160 South Silo

INSTRUCTIONS: Complete one timesheet for each student for whom you are providing services. If you are providing the same service to two or more students **in the same class** complete a single timesheet. Before submitting the timesheet, be sure all sections are fully completed and that both you and the student supervisor have signed and dated the form. Timesheets are due by the tenth (10<sup>th</sup>) working day of the month following service. Late timesheets will delay payment. Payment should be received within 2-3 weeks.

**PLEASE USE BLUE OR BLACK INK PEN** Month Services Provided \_\_\_\_\_ 20\_\_\_\_

Service Provider's Name: \_\_\_\_\_ \*Soc.Sec#: \_\_\_\_\_  
Last First M.I.

Mailing address where you want your check sent: \_\_\_\_\_  
Street or P.O. Box City State Zip

Phone: \_\_\_\_\_ Are you a UCD employee? Yes  No  Are you a CA resident? Yes  No

**INDICATE THE HOURS WORKED EACH DAY BY CLASS AND SERVICE.  
 ADD ONE HOUR ONCE A WEEK IF YOU ARE PROVIDING THE SAME SERVICES FOR TWO STUDENTS IN THE SAME CLASS**

		Day of the Month																															
Class	Service	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	

Service	Code	Rate	Course	Service	Rate	Total Hours	Total \$\$ Due	FOR OFFICE USE ONLY	
Communication Asst	CA	6.75						Rec #	Rcvd _____
Reader	R	"						Rec #	Entry Date _____
Test Assistant	TA	"						Rec #	
Lab Assistant	LB	"						Rec #	Initials _____
Transcriber	TS	"						Rec #	
Research Assistant	RA	"						Rec #	
Library Assistant	LA	"						Rec #	

We certify that the work done and other information provided are correct.

Service Provider's Signature \_\_\_\_\_ Date \_\_\_\_\_

SDC Student \_\_\_\_\_ Date \_\_\_\_\_  
Printed Name Signature

SDC Student (#2) \_\_\_\_\_ Date \_\_\_\_\_  
Printed Name Signature

\*PRIVACY NOTICE Pursuant to the Federal Privacy Act of 1974, you are hereby notified that disclosure of your social security number is mandatory, pursuant to Sections 6011 and 6051 of Subtitle F of the Internal Revenue Code and pursuant to Regulation 4, Section 404.1256, Code of Federal Regulations, under Section 218, Title II of the Social Security Act, as amended. The social security number is used to verify your identity. The principal uses of the number shall be to report payments and income taxes withheld to Federal and State governments.