

Timekeeper/Supervisor Form



Check all that apply:

For Office Use Only

Timekeeper (new)

Supervisor (new)

Other

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Department Number:			Department Name:		
Timekeeper (new)					
Name:			BroncoNet ID:		
			Enter upper/lower case		
Email:			Phone:		
If changing Timekeepers please provide the previous Timekeeper's name: Á					
Add:	Del.:	Dept.:	Add:	Del.:	Dept.:
Add:	Del.:	Dept.:	Add:	Del.:	Dept.:
Supervisor (new)					
Name:			BroncoNet ID:		
			Enter upper/lower case		
Email:			Phone:		
If changing Supervisors please provide the previous Supervisor's name:					
Add:	Del.:	Dept.:	Add:	Del.:	Dept.:
Add:	Del.:	Dept.:	Add:	Del.:	Dept.:
Effective Date:			(mm/dd/yyyy)Á		
Authorized Signature:				Date:	

Print, Sign, Date and then fax form to Payroll & Disbursements Department at 387-2937 or hand deliver.