DAILY RECORD OF TIME WORKED
TA/GRADER/MARKER/TUTOR/DEMONSTRATER
(time in minutes)

Course:		**Allotted time (hours):**	
Term:			
Employee Number:			

TASKS

Date	Class/Lab/Demonst'g	Preparation	Tutoring	Marking	Office Hours	E-mail responses	Phone consults	Consult Supervisor	Invigilating	Other(Please specify)	Total Time (min)	Total Time (hrs)