

Duke University Student Employment Reimbursement Voucher

Name of Organization: _____

Address: _____

Phone: _____

Students Name	Duke Unique ID # <i>OR</i> Student ID #	No. Hours	Rate/Hour	Gross Wages	Deductions	Net Wages	Dates Worked
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____

Total Gross Earnings _____

% of Reimbursement (50% or 90%) _____

Amount of Reimbursement _____

***Reminder: Students must be paid at least once a month. All reimbursement forms and corresponding time sheets & pay stubs must be returned to our office by June 15.**

**Duke University
Student Employment Office
Off-Campus Student Employment
Payroll Receipt Form**

Name of Organization: _____

Address: _____

Check Number	Net Pay	Date Received	Student's Name
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Supervisor's Signature verifying payment: _____

Return this form with your Duke University Reimbursement Voucher and copies of the student's time sheets & pay stubs to:

**Duke University
Office of Student Loans & Personal Finance
Box 90755
Durham, NC 27708-0397
Fax: (919) 684-6132
Email: studentloans@duke.edu**