

Michigan Self Determination Time Sheet

Sunday that started your work week

/ /

Time sheets are due to the office on Mondays by Midnight. If mailed, they must be postmarked by Monday. They are due every week. Late time sheets will result in late pay. You must sign the time sheet AFTER all work is complete. Do not turn in time sheets for work that has not been provided yet. Want to avoid paper time sheets? Enter your time the easy and secure way on the Consumer Direct Care Network Portal! Ask to be signed up today!

Employee Name (Please Print)	Employee ID	Participant Name (Please Print)	Participant ID

Service Date (MM/DD)	Time In	Time Out	Service Code	Task(s)
1 <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/>	<input type="text"/> : <input type="text"/> <input type="radio"/> AM <input type="radio"/> PM	<input type="text"/> : <input type="text"/> <input type="radio"/> AM <input type="radio"/> PM	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
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10 <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/>	<input type="text"/> : <input type="text"/> <input type="radio"/> AM <input type="radio"/> PM	<input type="text"/> : <input type="text"/> <input type="radio"/> AM <input type="radio"/> PM	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>

I certify that the hours, services, and tasks indicated above were provided to the Participant by the Employee as recorded. The Participant was not in a hospital, nursing home, or institution. False information or misrepresentation constitutes Medicaid fraud and may result in dismissal from the program and/or criminal prosecution.

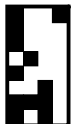
Employee Signature

Participant Signature

Date: ^{MM} / ^{DD} / ^{YY}

Date: ^{MM} / ^{DD} / ^{YY}

Please see back for instructions.



Time Sheet Instructions

Want to avoid the hassle of paper timesheets? Enter your time the fast, easy, and secure way at the Consumer Direct Care Network Portal! Ask your local office how to sign up.

These items must be complete for your timesheet to be processed:

- Employee Name
- Employee ID (7 digits)
- Participant Name
- Participant ID
- Employee Signature & Date - Must be dated on or after the last day worked.
- Participant Signature & Date - Must be dated on or after the last day worked.

Each line of time must include:

- Service Date
- Time In (AM/PM)
- Time Out (AM/PM)
- Service Code
- Task(s)

Make sure your timesheet is filled out completely and correctly, with all entries made neatly inside the boxes. Payment may be delayed if letters or numbers are not printed neatly inside the boxes WITHOUT touching any lines, or are not readable.

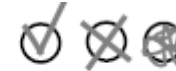
Please continue on a second timesheet if you run out of room on the first. Bold items on the list to the left must also be filled in on the second form.

For best results use **BLACK** ink

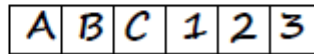
Shade circles completely, like this:



Not like this:



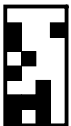
Fill boxes like this:



Not like this:



Please use the service codes that are approved on your employment agreement.



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