

NAME \_\_\_\_\_ POSITION \_\_\_\_\_

BEGINNING MONTH \_\_\_\_\_ / \_\_\_\_\_ ENDING MONTH \_\_\_\_\_ / \_\_\_\_\_ BUILDING/ DEPARTMENT \_\_\_\_\_  
MONTH YEAR MONTH YEAR MONTH YEAR

DAY  OF  MONTH	SECTION ONE ANNUALIZED STAFF ONLY  If your weekly work schedule is 20 hours or more and your pay is spread over 12 months (Annualized), enter your scheduled hours in this section.	SECTION TWO If your weekly work schedule is less than 20 hours per week, and your pay is not annualized, enter your time worked in this section.  For Annualized staff use this section to record extra hours worked.			SECTION THREE  If you did not work your full schedule for the day, <u>also</u> record your time off (paid and unpaid) in this section.							
		ADDL HOURS WORKED	OVER TIME HOURS	COMP TIME EARNED	LEAVE W/O PAY	SICK LEAVE	PRSNL LEAVE	COMP TIME USED	VAC LEAVE	BRVMT LEAVE	HLDY PAY	JURY DUTY
16th												
17th												
18th												
19th												
20th												
21st												
22nd												
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31st												
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4th												
5th												
6th												
7th												
8th												
9th												
10th												
11th												
12th												
13th												
14th												
15th												
TOTAL												

I certify that the information provided on this time sheet is true and correct to the best of my knowledge and belief. I understand that providing false information is a violation of company policy and may result in disciplinary action. I have read and understand the terms and conditions of the time sheet and agree to provide accurate information.

Employee's Signature

Date

Supervisor's Signature

Date