

**Note:** Official Workweek begins Sunday at 12:01 a.m. and ends at midnight Saturday. Overtime applies only to hours actually worked which exceed 40 hrs. within any Official Workweek (including weeks having holiday leave). At the beginning of each month designate correct dates next to corresponding days and indicate any **C** and/or **ET** Leave brought forward from previous pay period (in box at top of sheet). Use reverse side for comments.

# ECSU EMPLOYEE TIME SHEET

C/ET LEAVE BROUGHT FWD. :  
:

For Month Ending: \_\_\_\_\_

EMPLOYEE NAME: \_\_\_\_\_ SOCIAL SECURITY NUMBER: \_\_\_\_\_  
DEPT: \_\_\_\_\_ SUPERVISOR: \_\_\_\_\_ ACCT. NO. \_\_\_\_\_

\* If previous month's last Official Workweek was a partial week, indicate total hours actually worked that week (at right) to compute applicable Overtime and/or Leave Hours for Workweek 1 below. **DO NOT INCLUDE HOURS AT RIGHT IN TOTALS BELOW.** (Note: Figure at right + Total Hrs. Worked and Leave Taken (shown below) must = 40).

**For Reference Only**

<b>C</b>	NPS = Not Premium Shift Hrs.	<b>H</b>	= Paid Holiday Leave	<b>W</b>	= Worker's Compensation	<b>UP</b>	= Unpaid Leave
<b>D</b>	PS = Premium Shift Hrs.	<b>J</b>	= Jury Duty	<b>ET</b>	= Paid "Equal Time Off"	<b>XL</b>	= Uncoded Leave (Circle code and explain on reverse side)
<b>E</b>	S = Paid Sick Leave	<b>M</b>	= Paid Military Leave				
<b>S</b>	V = Paid Vacation Leave	<b>EL</b>	= Educational Leave	<b>C</b>	= Compensatory Leave		

WK. DAY	D A T E	IN Hr. : Min.	OUT Hr. : Min.	IN Hr. : Min.	OUT Hr. : Min.	Hours Worked Hr. : Min.	WORKWEEK <b>1</b>
SUN.		:	:	:	:	:	LEAVE TAKEN THIS WEEK (Must be coded)
MON.		:	:	:	:	:	
TUES.		:	:	:	:	:	Hr. : Min. Code(s)
WED.		:	:	:	:	:	
THU.		:	:	:	:	:	
FRI.		:	:	:	:	:	
SAT.		:	:	:	:	:	

WK. DAY	D A T E	IN Hr. : Min.	OUT Hr. : Min.	IN Hr. : Min.	OUT Hr. : Min.	Hours Worked Hr. : Min.	WORKWEEK <b>2</b>
SUN.		:	:	:	:	:	LEAVE TAKEN THIS WEEK (Must be coded)
MON.		:	:	:	:	:	
TUES.		:	:	:	:	:	Hr. : Min. Code(s)
WED.		:	:	:	:	:	
THU.		:	:	:	:	:	
FRI.		:	:	:	:	:	
SAT.		:	:	:	:	:	

WK. DAY	D A T E	IN Hr. : Min.	OUT Hr. : Min.	IN Hr. : Min.	OUT Hr. : Min.	Hours Worked Hr. : Min.	WORKWEEK <b>3</b>
SUN.		:	:	:	:	:	LEAVE TAKEN THIS WEEK (Must be coded)
MON.		:	:	:	:	:	
TUES.		:	:	:	:	:	Hr. : Min. Code(s)
WED.		:	:	:	:	:	
THU.		:	:	:	:	:	
FRI.		:	:	:	:	:	
SAT.		:	:	:	:	:	

WEEK 1 TOTALS:	CODED WORK HOURS		Tot. Worked	Leave	Overtime
	NPS: :	PS: :			

WEEK 2 TOTALS:	CODED WORK HOURS		Tot. Worked	Leave	Overtime
	NPS: :	PS: :			

WEEK 3 TOTALS:	CODED WORK HOURS		Tot. Worked	Leave	Overtime
	NPS: :	PS: :			

WK. DAY	D A T E	IN Hr. : Min.	OUT Hr. : Min.	IN Hr. : Min.	OUT Hr. : Min.	Hours Worked Hr. : Min.	WORKWEEK <b>4</b>
SUN.		:	:	:	:	:	LEAVE TAKEN THIS WEEK (Must be coded)
MON.		:	:	:	:	:	
TUES.		:	:	:	:	:	Hr. : Min. Code(s)
WED.		:	:	:	:	:	
THU.		:	:	:	:	:	
FRI.		:	:	:	:	:	
SAT.		:	:	:	:	:	

WK. DAY	D A T E	IN Hr. : Min.	OUT Hr. : Min.	IN Hr. : Min.	OUT Hr. : Min.	Hours Worked Hr. : Min.	WORKWEEK <b>5</b>
SUN.		:	:	:	:	:	LEAVE TAKEN THIS WEEK (Must be coded)
MON.		:	:	:	:	:	
TUES.		:	:	:	:	:	Hr. : Min. Code(s)
WED.		:	:	:	:	:	
THU.		:	:	:	:	:	
FRI.		:	:	:	:	:	
SAT.		:	:	:	:	:	

WK. DAY	D A T E	IN Hr. : Min.	OUT Hr. : Min.	IN Hr. : Min.	OUT Hr. : Min.	Hours Worked Hr. : Min.	WORKWEEK <b>6</b>
SUN.		:	:	:	:	:	LEAVE TAKEN THIS WEEK (Must be coded)
MON.		:	:	:	:	:	
TUES.		:	:	:	:	:	Hr. : Min. Code(s)
WED.		:	:	:	:	:	
THU.		:	:	:	:	:	
FRI.		:	:	:	:	:	
SAT.		:	:	:	:	:	

WEEK 4 TOTALS:	CODED WORK HOURS		Tot. Worked	Leave	Overtime
	NPS: :	PS: :			

WEEK 5 TOTALS:	CODED WORK HOURS		Tot. Worked	Leave	Overtime
	NPS: :	PS: :			

WEEK 6 TOTALS:	CODED WORK HOURS		Tot. Worked	Leave	Overtime
	NPS: :	PS: :			

Have you worked for any other Department during this pay period?  Yes  No

PAY PERIOD GRAND TOTALS	NPS HRS.	PS HRS.	TOTAL HRS. WORKED	ET HRS. EARNED	OVERTIME	COMP. TIME EARNED	C / ET LEAVE TAKEN	H LEAVE TAKEN	S LEAVE TAKEN	V LEAVE TAKEN	TOT. OTHER PAID LEAVE
	:	:		:	:	:	:	:	:	:	:

**EMPLOYEE/SUPERVISOR CERTIFICATION:**

I/we certify that all hours on this time sheet have been recorded accurately and that all other information is correct.

Employee's Signature \_\_\_\_\_

Immediate Supervisor's Signature: \_\_\_\_\_

DATE \_\_\_\_\_

DATE \_\_\_\_\_

Check if applicable   
See reverse side for Comments.

**C AND/OR ET LEAVE BALANCE AT END OF THIS PAY PERIOD** \_\_\_\_\_  
Must be used within 12 months