

DAILY HOURS WORKED REPORT v1.2 10/5/2015

Last Name, First Name, Middle Initial
Department - Supervisor
Job Title



Employee Type	
<input type="checkbox"/>	Student
<input type="checkbox"/>	Temporary (incl. non-merit)
<input type="checkbox"/>	Community Services Specialist

Daily Hours Worked Report Type	
<input type="checkbox"/>	Original
<input type="checkbox"/>	Adjusted

See Attached Report

Circle the Month Being Reported: January February March April May June July August September October November December

"X" Period Reported		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31		
<input type="checkbox"/>	1st - 15th																																	
<input type="checkbox"/>	16th - EOM	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31																	
Employee	Time In																																	
	Time Out																																	
	Time In (Split Shift)																																	
	Time Out (Split Shift)																																	
	Time In (Split Shift)																																	
	Time Out (Split Shift)																																	
	Lunch (0, 30, 60)																																	
																		Total Hours Reported																
Supervisor	Regular																																	
	Overtime																																	
	Sick Leave																																	
																		Total Hours Reported:																

I hereby certify that these hours and dates are a true and accurate representation of time worked by me and approved by my Department. I understand that my paycheck may be delayed if I do not complete this report in a timely manner consistent with the payroll schedules provided to me by my Department.

EMPLOYEE SIGNATURE	DATE

EMPLOYEE INSTRUCTIONS

1. Fill in NAME, DEPARTMENT and JOB TITLE.
2. Circle the MONTH you are reporting and mark the box for the TIME PERIOD you are reporting (either 1st-15th or 16th-EOM).
3. Mark your employee category (Student, Temporary Classified or Community Services).
4. Mark box to indicate whether this is an Original Daily Hours Worked Report or an Adjusted Daily Hours Worked Report (used to submit corrections from the previous daily hours worked reports if necessary-see instructions below).
5. Each day you work, record your TIME IN, TIME OUT and the length of lunch period taken (0, 30 or 60 minutes).
 - Multiple “Time In” and “Time Out” spaces are available each day for students working a split shift. For example a student may work 10am – 11am, leave to attend class and then return and work 2pm-5pm on the same day.
6. At the end of the reporting period sign and date the EMPLOYEE SIGNATURE section and submit to supervisor.

SUPERVISOR INSTRUCTIONS

1. Verify the daily time reported by the employee then calculate and enter the daily regular hours and any overtime hours worked that day.
2. Enter any sick leave hours used that day.
3. Log in to the [myTime](#) reporting system.
4. Enter the data from each employee’s Daily Hours Worked Report in the [myTime](#) reporting system.
5. Submit timesheets in [myTime](#) reporting system.
6. Send the signed, completed Daily Hours Worked Report document to the appropriate payroll specialist for reconciliation and storage.

OVERTIME RULES / CALCULATION EXAMPLES

Regular hours cannot exceed 8 hours in any given day; any hours worked that exceed 8 hours in a day are overtime.

ADJUSTED DAILY HOURS WORKED REPORT

If you discover there is an error or omission in a myTime report that has already been submitted, call the Payroll Manager (x4327) immediately to determine what process to follow for the adjustment. Print a new Daily Hours Worked Report and;

- Fill in the employee information, indicate the employee type and indicate in the Daily Hours Worked Report Type section that this is a “Adjusted” report.
- Circle the month the adjusted report is for, and indicate 1 - 15th or 16th – EOM.
- **Only enter the information that changed from the original report submitted.**
- Have the employee sign and date the adjusted report.
- If instructed by Payroll Manager, enter the revised information in myTime.
- Forward the adjusted Daily Hours Worked Report to the Payroll Department for reconciliation and storage.

IMPORTANT REMINDERS REGARDING STUDENT EMPLOYMENT

- At Santa Monica College, student employees are restricted to working no more than 7 hours in any given day and not more than 19.5 hours per week during fall/spring semesters or 30 hours per week during the winter/summer semesters.
- There should NEVER be overtime reported for student employees. Any department found to be in violation of these restrictions could lose the privilege of employing student employees.

DAILY HOURS WORKED REPORT v1.2 10/5/2015

Last Name, First Name, Middle Initial
Doe, John
Department - Supervisor
Fiscal Services
Job Title
Administrative Assistant II



Employee Type	
	Student
X	Temporary (incl. non-merit)
	Community Services Specialist

Daily Hours Worked Report Type	
X	Original
	Adjusted

See Attached Report

Circle the Month Being Reported: January February March April May June July August September **October** November December

"X" Period Reported																		
X	1st - 15th	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15		
	16th - EOM	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	
Employee	Time In	8:00 AM			12:00 PM				8:00 AM	8:00 AM					8:00 AM			
	Time Out	1:00 PM			3:00 PM				6:00 PM	10:00 AM					3:30 PM			
	Time In (Split Shift)									1:00 PM								
	Time Out (Split Shift)									3:00 PM								
	Time In (Split Shift)																	
	Time Out (Split Shift)																	
	Lunch (0, 30, 60)	30								60						30		
Total Hours Reported																		
Supervisor	Regular	4.50			3.00				8.00	4.00					7.00		26.50	
	Overtime								1.00								1.00	
	Sick Leave												8.00				8.00	
Total Hours Reported: 35.50																		

I hereby certify that these hours and dates are a true and accurate representation of time worked by me and approved by my Department. I understand that my paycheck may be delayed if I do not complete this report in a timely manner consistent with the payroll schedules provided to me by my Department.

EMPLOYEE SIGNATURE	DATE
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