



EMPLOYEE NAME: \_\_\_\_\_ UCB ID #: \_\_\_\_\_

TITLE: \_\_\_\_\_ DEPARTMENT \_\_\_\_\_

BI WEEKLY PERIOD: Sun / / - Sat / / [Bi-Weekly calendar available via this link](#)

University of California, Berkeley  
Campus Shared Services, 1608 4th Street, Berkeley, CA 94710  
Telephone: (510) 664 - 9000, Option 3

DATE	DAY OF WEEK	REG	IN	OUT	HOURS	PAY CODE	HOURS	PAY CODE	HOURS	FRIENDLY NAMES	DAILY TOTAL HOURS

- PAY CODES:**
- ADM: ADMINISTRATIVE LEAVE W/ PAY
  - BRV: BEREAVEMENT - SICK LEAVE TAKEN
  - CTO: COMPENSATORY TIME OFF
  - FML: FAMILY MEDICAL LEAVE ACT (LWOP)
  - FML: FAMILY MEDICAL LEAVE ACT (SICK)
  - JD: JURY DUTY
  - LOP: LEAVE WITHOUT PAY
  - OTP: OVERTIME PREMIUM (X 1.5)
  - OTS: OVERTIME STRAIGHT
  - REG: REGULAR
  - SDF: SHIFT DIFFERENTIAL
  - SKL: SICK LEAVE TAKEN
  - UBL: UNION BUSINESS LEAVE
  - VAC: VACATION LEAVE TAKEN
  - WCS: WORKERS COMPENSATION - SICK

*Employee's Signature:* \_\_\_\_\_ *Date:* \_\_\_\_\_

*Supervisor's Signature:* \_\_\_\_\_ *Date:* \_\_\_\_\_

**Note that you can use several timesheets if you need more space to record additional hours  
Please submit your timesheet to your Supervisor for entry into CalTime.**