

PART-TIME CLASSIFIED EMPLOYEE TIMESHEET

Name	
910 Number	
Work Schedule days/ hours:	
Month	

		Hours	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	1	2	3	4	5	6	7	8	9	10	11	12	13	14	Pay	Accrue		
Worked	Regular Hours																																				
	Overtime Pay																																				
	Overtime Accrue																																				
	Holiday																																				
	Other																																				
Premium	Haz Mat Diff.																																				
	Shift Diff.																																				
	Call Back (1)																																				
	Stand By																																				
Taken	Vacation Leave																																				
	Personal																																				
	Comp/Exchange																																				
	Holiday																																				
	LWP-Other(2)																																				
	LWOP																																				

(1) 2 hour or less will be paid; more than 2 hours worked may be paid or accrued.

(2) Explanation required in remarks section

PAID Total: _____

LWOP: _____

Total: _____

Remarks: _____

I certify that the above hours are correct.

 Employee Signature

 Supervisor Signature