NC STATE UNIVERSITY TIME RECORD

EMPLOYEE NAME	PEOPLESOFT ID NUMBER	EPA	FLSA NONEXEMPT	FLSA EXEMPT	PAY PERIOD BEGINNING MM / DD / YY
DEPARTMENT	Was work performed in another department or agency? YES NO	SPA	BIWEEKLY	MONTHLY	ENDING MM / DD / YY

HOURS WORKED

WEEK	SAT	SUN	MON	TUE	WED	THU	FRI	TOTAL WORKED
1								
2								
3								
4								
5								
TOTALS								

INSTRUCTIONS ON REVERSE.

Reset Form

Leave Used							Total Hours	Comp Time Earned		Additional Hours To Be Paid					
Vacation	Sick	Comp Time	Holiday	Comm. Service	Adverse Weather	Other		Hours Worked >40	Extra Time	030 Over Time	130 Extra Time	040 Shift Time	033 Shift Prem CT	155 Holiday Pay	080 On Call Pay

DAILY HOURLY RECORD (IN/OUT — SUPERVISOR'S OPTION)

WEEK	SAT		SUN		MON		TUE		WED		THU		FRI	
	IN	OUT	IN	OUT	IN	OUT	IN	OUT	IN	OUT	IN	OUT	IN	OUT
1														
2														
3														
4														
5														

✸ ACCUMULATIVE LEAVE TOTALS

	Vacation	Sick	Community Service
Balance from last month			
Earned this month			
Total			
Used this month			
Ending balance			

✸ COMP TIME BALANCE

Comp balance from last month	
Overtime earned this month (x1.5)	
Extra time earned this month	
Total comp available	
Comp used this month	
Ending balance	

✸ ADVERSE WEATHER

Balance owed	
Charged this month	
Total owed	
Made up this month	
Balance owed	

NC STATE UNIVERSITY DIVISION OF HUMAN RESOURCES

✸ These leave types are officially monitored via the University Web Based Leave application. There is no University requirement that these boxes be completed. Individual departments may set their own policy regarding completion of these boxes.

REQUIRED SIGNATURES

EMPLOYEE

DATE

SUPERVISOR

DATE

8/04 — Retain for five years.