

Employee Time Record



Name _____

Period Ending: _____

Position: _____

Dept. #: _____

Employee #: _____

* ** *** **** *****

Day of Period	In	Out	In	Out	In	Out	In	Out	Tot Reg Hrs	Tot Ot Hrs	Tot Dbl Hrs	Break Time	Tot Vac Hrs	Tot Ill Hrs	Tot Hol Hrs	Tot Other	Comments
MON.																	
TUE.																	
WED.																	
THU.																	
FRI.																	
SAT.																	
SUN.																	
MON.																	
TUE.																	
WED.																	
THU.																	
FRI.																	
SAT.																	
SUN.																	
PAY PERIOD TOTALS																	
												N/A					

* Reg Hrs = 37.5 To 40.0 Hrs/Wk

** Ot Hrs - More than 8 hrs/day; More than 40 Hrs/Wk

*** Indicates total hrs for vacation time, illness and holidays

All time which does not fall into one of the above categories must be entered in the "Tot Other" column with a brief explanation in the "Comments" section.

**** Select "N" for each day that you did not take either of your 10 minute breaks.

Employee Signature

Date

Supervisor Approval

Date