

Timesheet – Elapsed (Exempt Employee)

Employee Name: Job Title:							
From Monday to	MM/DD/YYYY)						
	Mon	Tue	Wed	Thu	Fri	Sat	Sun
Regular Time							
Time Reporting Code or Absence Type							
Time Reporting Code or Absence Type							
Time Reporting Code or Absence Type							
Time Reporting Code or Absence Type							
Time Reporting Code or Absence Type							
Time Reporting Code or Absence Type							
Comments:				<u> </u>			
Staff employees: Check one box only Apply my schedule as worked hour Apply my schedule with the noted Student employees (GRA, GTA, Resident ALL Actual hours worked. I certify the above to be a true and cor	exception timent Assistant)) <u>:</u>		nd all time al	osent.		
Employee Signature:			Date: (MM/DD/YYYY)				
Supervisor Signature:				te:/_			
Timekeeper Initials Date: _	/						
1. STCT – State Time Comp Taken 2. CONF – Conference* 3. TRN – Training* 4. TRVL – Travel* 5. HLWRK – Holiday Worked (Employees *Code may be used in the reported Time	with <.50% FTL	E only)	1. VAC – Vacati 2. SICK – Sick 3. FHL – Floatin 4. JURY – Jury I 5. BRV – Berea 6. PTC – Educat 7. Misc. – Votir Management for	on g Holiday Duty vement tional Activition g (Timeshee or entry into	et must be fo PeopleSoft, if	rwarded to H	