



Employee Name:				Employee ID:				
Job Title:				Empl Record:				
Department:			_					
From Monday: to S		Sunday	(MM/D	IM/DD/YYYY)				
ONLY REPORT TIME WORKED THIS SECTION.								
Day	Time In	Time Meal Out	Time M	eal In	Time Out	Time Reporting Code or Absence Type	Quantity	
Mon								
Mon								
Tue								
Tue								
Wed								
Wed								
Thu								
Thu								
Fri								
Fri								
Sat								
Sat								
Sun								
Sun								
Comments:								
CERTIFICATION AND SIGNATURES								
I certify the above to be true and correct accounting of all time worked and all time absent.								
Employee Signature:				Date:				
Supervisor Signature:						Date:		
Timekeeper Initials: Date:  TIMESHEET REPORTING CODES								
Time Reporting Codes: Absence Types:								
1. STCT – State Time Comp Taken				1. SICK – Sick				
2. OTCT – Overtime Comp Taken				2. FHL – Floating Holiday				
3. CONF – Conference*				3. BRV – Bereavement				
4. TRN – Training*				4. JURY – Jury Duty				
5. TRVL – Traveling*				5. PTC – Educational Activities				
6. OCP – Overtime Payout				6. Misc. – Voting (Timesheet must be forwarded to HR Leave				
7. FACL – Facilities Closure				Management for entry into PeopleSoft, if used)				
8. EMCL – Weath	ner Closure							
*Code may be used in the reported Time Worked section					For other absence types contact HR-Leave Administration			