



BIWEEKLY TIMESHEET Fillable - DO NOT write in the grey cells

Check One	
<input type="checkbox"/>	Para
<input type="checkbox"/>	Tutor
<input type="checkbox"/>	Sub
<input type="checkbox"/>	Clerical
<input type="checkbox"/>	Accounting
<input type="checkbox"/>	Custodian
<input type="checkbox"/>	Food Service
<input type="checkbox"/>	_____

Employee: _____
Print or Type

Campus: _____

Paid Time Off Key: S=Sick FS=Family Sick P=Personal
 V=Vacation CT=Comp.Time B=Bereavement
 H=Holiday

IMPORTANT: enter time in H:MM format followed by a space then **AM** or **PM**

Hours of Paid Time Off entered, MUST have a corresponding Leave Key entry

Date	SUN	MON	TUES	WED	THUR	FRI	SAT		
WEEK ONE	In								
	Out								
	In								
	Out								
	Hours Worked							-	Hours Worked
	Hours of Paid Time Off							-	Paid Time Off
	Total Paid Time							-	Total Paid Time
	Notes							-	Total Extra Time
	Leave Key								

Date	SUN	MON	TUES	WED	THUR	FRI	SAT		
WEEK TWO	In								
	Out								
	In								
	Out								
	Hours Worked							-	Hours Worked
	Hours of Paid Time Off							-	Paid Time Off
	Total Paid Time							-	Total Paid Time
	Notes							-	Total Extra Time
	Leave Key								

Office Use Only

Employee Signature: _____

Date: _____

Make notes on your timesheet as necessary to notify the Payroll Agent what duty was being performed and when.

Supervisor Approval: _____

Date: _____