NON-EXEMPT EMPLOYEES' - TIME AND ATTENDANCE SHEET

INSTRUCTIONS: Please complete ALL of the information needed, including daily hours worked and weekly totals.
All daily totals should be figured to the nearest quarter hour in decimals (Example: 1 hr. 30 min. equals 1.5)
All alterations and corrections must be initialed by the Supervisor.

Employee Name: _____ **Dept. Name:** _____ **Dept. No:** _____

Pay Period Sunday…	**...through Saturday**

Work Week #1 **Beginning Sunday:** _____ **and ending Saturday:** _____

	Start Time	End Time	Duration of Lunch Period	Total Hours Worked (Start to End Minus Lunch)	Total Hours Absent	Absence Code*	Supervisor's Notes:
Sunday							
Monday							
Tuesday							
Wednesday							
Thursday							
Friday							
Saturday							

Total Regular Hours for Week 1		(maximum of 40)
Total Overtime Hours for Week 1		(number of hours worked over 40)

Work Week #2 **Beginning Sunday:** _____ **and ending Saturday:** _____

	Start Time	End Time	Duration of Lunch Period	Total Hours Worked (Start to End Minus Lunch)	Total Hours Absent	Absence Code*	Supervisor's Notes:
Sunday							
Monday							
Tuesday							
Wednesday							
Thursday							
Friday							
Saturday							

Total Regular Hours for Week 2		(maximum of 40)
Total Overtime Hours for Week 2		(number of hours worked over 40)
Total Regular Hours for Pay Period		
Total Overtime Hours for Pay Period		

*** ABSENCE CODES**

Paid Time Off			Unpaid Time Off	
B Bereavement	**FMLA** Family & Medical Leave	**S** Sick	**FMLA-U** Unpaid	
H Holiday	**JD** Jury Duty	**V** Vacation	**PL** Personal Leave-Unpaid	**ML** Military Leave-Unpaid

I CERTIFY THAT THE ABOVE IS AN ACCURATE REFLECTION OF DAILY HOURS WORKED
AND THAT THE TOTALS ARE CORRECT BASED ON THE DAILY HOURS WORKED.

Employee's Signature	**Date**	**Supervisor's Signature**	**Date**