

SUNY CORTLAND-DAILY TIME RECORD FOR CLASSIFIED STAFF

NAME _____

LINE NO. _____

PAY PERIOD _____ TO _____

PRINT (LAST NAME, FIRST NAME, MIDDLE INITIAL)

	DATE	EARNED				EARNED							SIGNATURE (FIRST INITIAL AND LAST NAME)	USED					TOTAL HOURS				
		AM		PM		REG HRS	COMP TIME	EXT TIME	HOL CASH	OVER 40 COMP TIME	OT	HOL COMP		VAC	SL	PL	COMP TIME	HOL					
		IN	OUT	IN	OUT	IN	OUT	IN	OUT														
TH																							
F																							
SA																							
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TOTAL COLUMNS 1-12 FOR GRAND TOTAL										TOTALS	1	2	3	4	5	6	7	8	9	10	11	12	GRAND TOTAL

ACCRUAL SUMMARY 2 WEEK PERIOD

	VACATION	SICK LEAVE	PERSONAL LEAVE	COMP TIME	OVER 40 COMP TIME	HOL COMP	DATE	FLOATING HOL	DATE
BALANCE FORWARD									
CREDITS EARNED									
COMP TIME EARNED									
SUB-TOTAL CHARGES THIS PERIOD									
BALANCE END OF PERIOD									

MAX OF 240 HRS CAN NOT BE TAKEN AS TIME OFF

PAYROLL USE ONLY

OVERTIME	
MEALS	
HOLIDAY	
EXTRA TIME	

I CERTIFY THAT THIS IS A TRUE AND CORRECT ATTENDANCE AND ABSENCE RECORD OF THIS EMPLOYEE. ALL LEAVES TAKEN HAVE BEEN IN ACCORDANCE WITH THE N.Y.S. RULES OF ATTENDANCE; ALL OVERTIME EARNED HAD MY PRIOR APPROVAL AND EACH TARDINESS HAS BEEN NOTED.

SUPERVISORS' SIGNATURE

DATE

Minutes to Decimal conversion

- 15 min = .25 hour
- 30 min = .50 hour
- 45 min = .75 hour