NONEXEMPT WEEKLY TIME REPORT TRANSPORTATION

Print	all	information	in	ink	

Name			ID #		Campus/Dept			
Pay period begin		Pay p	eriod end		_Employee's Regular Hours per Day			
For each week: First line – Ente Second line – Ro Third line – Ro Total Hours Co worked + leave ! Signatures requ	eport all hours oort all leave h lumn – Total t nours) exceed i	worked to the ours and the al he hours work	nearest quarte osence code as ted for the wee	r hour, includir sociated with tl k and total the	ne leave. Refe hours of leave			
Week 1	Mon	Tues	Wed	Thurs	Fri	Sat	Sun	Total Hours
Hours Worked Leave Hours/ Absence Code								
Week 2	Mon	Tues	Wed	Thurs	Fri	Sat	Sun	Total Hours
Hours Worked Leave Hours/ Absence Code								
Week	Mon	Tues	Wed	Thurs	Fri	Sat	Sun	Total Hours
Hours Worked Leave Hours/ Absence Code								
Week	Mon	Tues	Wed	Thurs	Fri	Sat	Sun	Total Hours
Hours Worked Leave Hours/ Absence Code								
Week	Mon	Tues	Wed	Thurs	Fri	Sat	Sun	Total Hours
Hours Worked Leave Hours/ Absence Code								
I certify this is		record of th		rs worked.	_	P	bsence Codes: – Personal Leave – Sick Leave	
Employee Signature		Date		SD – Staff Development H – Holiday C – Comp Time Off V – Vacation J – Jury Duty or Subpoena				
Supervisor Signature		Date		L – Leave without Pay				

Revised 7/25/07