College Houses and Academic Services - University of Pennsylvania

TIMESHEET

WEEKLY & HOURLY PAID STAFF

|  |  |
| --- | --- |
| Name |  |
| Title |  |
| Department |  |
| Pay Period Ending |  |
| Scheduled Hours per Week |  |

***To ensure compliance with departmental policies and federal and state law, non-exempt (weekly and hourly paid) staff members are required to receive prior approval from their supervisors to work in excess of their scheduled hours per day or in excess of 40 hours per workweek. All non-exempt staff will be paid premium overtime for actual hours worked beyond 40 hours per workweek. Working overtime without prior approval is considered to be in violation of the Overtime Compensation and/or Compensatory Time policy (Policy No: 302).***

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | Date | Time In | Time Out | Time In | Time Out | Actual Hours Worked | Non-worked Hours | Non-worked Hours Code | **Total Hours** |
| Monday |  |  |  |  |  |  |  |  |  |
| Tuesday |  |  |  |  |  |  |  |  |  |
| Wednesday |  |  |  |  |  |  |  |  |  |
| Thursday |  |  |  |  |  |  |  |  |  |
| Friday |  |  |  |  |  |  |  |  |  |
| Saturday |  |  |  |  |  |  |  |  |  |
| Sunday |  |  |  |  |  |  |  |  |  |
| **Totals** |  |  |  |  |  |  |  |  |  |

|  |  |
| --- | --- |
| Regular Hours (Regularly Scheduled Workweek) |  |
| Straight-Time Overtime Hours |  |
| Premium Overtime Hours (Actual hours worked over 40) |  |

Number of Straight-Time Overtime Hours to be Paid This Pay Period: \_\_\_\_\_\_\_\_\_

Number of Straight-Time Overtime Hours to be Taken as Compensatory Time-Off at a Later Date: \_\_\_\_\_\_\_\_\_

Note: Compensatory Time-Off may not be accrued in any week in which a staff member works in excess of 40 hours. All compensatory time off must be taken or paid within 3 months of the date earned.

**Non-Worked Hours Codes:**

# SCK = Sick

**SCKM = Sick Family Member**

**VAC = (PTO - Paid Time Off)**

## JUR = Jury

## HOL = Holiday

**FNL = Funeral**

**COM = Compensatory Time**

**Signatures:**

**Staff Member Date Supervisor Date**

Timesheets are to be submitted to your supervisor for review every Thursday by 3:00 p.m.