

WEEKLY NON-EXEMPT TIME RECORD

Name: _____

ID Number: _____ Campus: _____

Job Assignment #1

Aide Bus Driver Bus Monitor Coach Cafeteria Other

Job Assignment #2

Aide Bus Driver Bus Monitor Coach Cafeteria Other

| | Date | IN | OUT | IN | OUT | IN | OUT | IN | OUT | Hours Worked | Amount of Leave Used | Type of Leave Used |
|-----------|------|----|-----|----|-----|----|-----|----|-----|--------------|----------------------|--------------------|
| Saturday | | | | | | | | | | | | |
| Sunday | | | | | | | | | | | | |
| Monday | | | | | | | | | | | | |
| Tuesday | | | | | | | | | | | | |
| Wednesday | | | | | | | | | | | | |
| Thursday | | | | | | | | | | | | |
| Friday | | | | | | | | | | | | |

Total Hours

Leave Type Codes

L - Local Leave C - Comp Time D - Death In Family
 S - State Leave H - Holiday J - Jury Duty or Subpoena
 D - Dock V - Vacation B - School Business
 O - Other

I certify this is an accurate record of the actual hours worked.

Employee Signature

Date

Supervisor Job 1

Date

Supervisor Job 2

Date

For Payroll Use Only

| | | | | | | | | |
|----------------------|--|-----------------|--|---------------|--|------------------|--|-------|
| Regular Hours Worked | | OT Hours Worked | | OT Hours Paid | | Comp Time Earned | | Other |
|----------------------|--|-----------------|--|---------------|--|------------------|--|-------|