

Eastern Washington University

<input type="checkbox"/> Eligible for Overtime <input type="checkbox"/> Not Eligible for Overtime
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Exempt (eligible and not eligible for overtime)
 Time Sheet for Month of _____ 20____

Instructions:

1. If the employee is eligible for overtime, he/she must submit a time report for each pay period showing regular hours worked.
2. If the employee is not eligible for overtime, he/she must submit a time report only if there is paid leave or leave without pay.
3. Daily entries must be in hours and decimals. Please type or use black/blue pen.
4. For comp time earned, enter actual comp time hours worked by date. Multiply actual hours by 1.5 and enter the result in the total column at the left.

Name _____ EWU ID _____
Last First MI

Department _____ Percent of Time _____ Days Off _____
Phone Number

		Earn Code	Total	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	
Regular Time	Regular Time Worked	HRS																		
Paid Leave Taken	Vacation Leave	VAC																		
	Sick Leave	CSL																		
	Personal Holiday	PH																		
	Compensatory Time Taken	CMP																		
	Civil/Jury Leave	CLV																		
	Bereavement Leave Taken	BLV																		
	Military Leave	MLV																		
	Other Paid Leave	OPL																		
	Shared Leave	Shared Leave Taken	SLT																	
Leave Without Pay	Leave Without Pay - Cyclic	LWC																		
	Leave Without Pay - Other	LWO																		
Additional Pay	Straight Time Pay	STP																		
Comp Time Earned	Comp Time Earned - 1.5 Rate	CTE																		
	Comp Time Earned - Straight Time	CT1																		

Employee's Signature I certify the above record is true and correct	Date
Supervisor's Signature I certify the above record is true and correct	Date