

Full Name of Employee \_\_\_\_\_  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
 Beginning Payroll Date

Work Station \_\_\_\_\_ Monthly Equal Pymts \_\_\_\_\_  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Hourly \_\_\_\_\_  
 Ending Payroll Date Exempt Salaried \_\_\_\_\_

Date	Time In	Time Out	Daily Totals	Describe Activity &/or Holiday Credit / Type of Leave
M				
T				
W				
T				
F				
<b>Weekly Work Totals</b>				
M				
T				
W				
T				
F				
<b>Weekly Work Totals</b>				
M				
T				
W				
T				
F				
<b>Weekly Work Totals</b>				
M				
T				
W				
T				
F				
<b>Weekly Work Totals</b>				
M				
T				
W				
T				
F				
<b>Weekly Work Totals</b>				

Holiday(s) Included \_\_\_\_\_ Duty (Work) Hours (Days) Subtotal \_\_\_\_\_  
 Annual Day(s) Used \_\_\_\_\_ Approved Sick Leave Day(s) Used \_\_\_\_\_  
 (or check here if not applicable) \_\_\_\_\_

**Total Paid Hours / Days**

Attach Leave Request form and note type of leave in space for hours credit.  
 My work hours expected daily average is:  Detail & secure approval for all leave and time absent. Salaried employees should note hours present and location of work only to document activities and verify supervision duties.

\_\_\_\_\_  
 Employee Signature Time Verified By

Initial next to your funding source, if known:  
 Head Start \_\_\_\_\_ Adm. Cost Pool \_\_\_\_\_  
 Child Care \_\_\_\_\_ Other \_\_\_\_\_  
 USDA \_\_\_\_\_