

BIWEEKLY EMPLOYEE TIMESHEET

Employee Name: Nazhone Morgan	Employee 6-digit ID (do not enter SSN or student ID): 344167		
Supervisor: Annie Margaret	Work study: Yes		
Pay Period Dates: 8/20 - 9/2	Total 2-week hours: 1.25		

DATES	8/20	8/21	8/22	8/23	8/24	8/25	8/26	Week 1
Day	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Total Hours
AM Time In								
AM Time Out								
PM Time In	15:15							
PM Time Out	16:30							
Daily Total	1.25							1.25

DATES	8/27	8/28	8/29	8/30	8/31	9/1	9/2	Week 2
Day	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Total Hours
AM Time In								
AM Time Out								
PM Time In								
PM Time Out								
Daily Total								

Time worked must be recorded in 15 minute increments by rounding to the nearest quarter hour. When calculating the time worked each shift, hours are reported in 15 min increments as follows: 15 mins = 0.25, 30 mins = 0.50, 45 mins = 0.75 & 60 mins = 1.0; so 5 hours and 45 mins would be 5.75.

In the TIME IN & TIME OUT columns, time is reported as follows:

- 8-22 mins into the hour are reported as 15 mins after the hour (e.g. 9:08-9:22 = 9:25)
- 23-37 mins into the hour are reported as 30 mins after the hour (e.g. 9:23-9:37 = 9:30)
- 38-52 mins into the hour are reported as 45 mins after the hour (e.g. 9:38-9:45 = 9:45)
 - Anything 53 mins before the hour through 7 mins after is reported as the hour (e.g. 9:53-10:07 = 10:00)

Certification: I understand my job classification is eligible for overtime payment. These payments will be made at the rate of one and one-half time my hourly rate. I agree to work overtime only with advance approval of my supervisor. Failure to receive advance approval for overtime worked may result in a corrective or disciplinary action which may include termination of University employment. If applicable, student employee is enrolled in the proper number of credit hours, pursuant to campus specific student employment guidelines.

period. All leave taken was reported and approved by my supervisor, and the work	was performed in a satisfactory manner.
Employee's Signature:Nazhone Morgan	
Supervisor's Signature:	

I certify hours and minutes shown herein are a complete and accurate record of time worked each day and for the reporting