

# ECUAD TIMESHEET

PLEASE PRINT

I confirm the information I have supplied is correct

YEAR MONTH DAY

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\_\_\_\_\_  
 LAST NAME FIRST NAME

\_\_\_\_\_  
 EMPLOYEE SIGNATURE

PAY PERIOD ENDING

LAST NAME

FIRST NAME

EMPLOYEE SIGNATURE

00							
FUND	LOC	COST CENTRE	LABOUR CODE				

NO EXCEPTIONS

\_\_\_\_\_  
 EMPLOYEE PHONE # COLLEAGUE #

DATE			NO. OF HOURS WORKED				SHIFT DIF. HOURS (CUPE)	NO. OF HOURS ABSENT	
YEAR	MONTH	DAY	Regular scheduled hours	ADDITIONAL HOURS <small>P/T Employees Only</small>	OVERTIME		After 7 or weekends	Hours	Absence code
					Pay/Hrs	Bank/Hrs			
<b>TOTALS</b>									

- ABSENCE CODES - PAID**
- BT Banked time taken
  - BD Bonus Day
  - HO Stat Holiday (scheduled day off)
  - HW Stat Holiday (scheduled work day)
  - V Vacation
  - PD Prof. Development
  - FI Family Illness
  - G Gratuity Day
  - T Training
  - B Bereavement
  - J Jury
  - F Flex
  - S Sick
  - SW Sick/WCB
  - O Off campus duty
  - U/E Union/Paid by ECU

- ABSENCE CODES - UNPAID**
- U/U Union / paid by Union
  - LOA Approved Leave of Absence

**FOR ADMINISTRATION USE ONLY**

CUPE	Pay Grade	Step		Rate
Permanent	<input type="text"/>	<input type="text"/>	Monitor	<input type="text"/>
Temporary	<input type="text"/>	<input type="text"/>	Honorarium	<input type="text"/>
Replacement	<input type="text"/>	<input type="text"/>	Research Assist	<input type="text"/>
			Teaching Assist	<input type="text"/>
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<b>FACULTY</b>	Step			Rate
Substitute	<input type="text"/>		Model	<input type="text"/>
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Sub/Model Course Name	<input style="width: 100%;" type="text"/>			

**ALL overtime must be pre-approved by the department head and signed before submitting to Payroll Dept.**

\_\_\_\_\_  
OT Approval (Print)

\_\_\_\_\_  
OT Approval (Sign)

\_\_\_\_\_  
Supervisor (Print)

\_\_\_\_\_  
Supervisor (Sign)