

Eastern Washington University

Classified Time Sheet for Month of _____ Year _____

Daily entries must be in hours and decimals. Type or use black/blue pen.

Work Week
<input type="checkbox"/> Regular
<input type="checkbox"/> Alternate

Name _____ EWU ID Number _____
Last First MI

Department _____ Phone Number _____ Percent of Time _____ Days Off _____

Work Shift _____

		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	BLV																		
	Military Leave	MLV																		
	Other Paid Leave	OPL																		
	Release Time – Union Activity	REL																		
	Shared Leave Taken	SLT																		
	Emergency Child Care – Comp	ECC																		
	Emergency Child Care – Vacation	ECV																		
	Emergency Child Care – Sick	ECS																		
	Emergency Child Care – LWOP	ECL																		
Leave Without Pay	Leave Without Pay – Cyclic	LWC																		
	Leave Without Pay – Other	LWO																		
Additional Pay	Paid Overtime	OVT																		
	Call Back Pay	CBP																		
	Standby Pay	SBP																		
	Premium Pay – Holiday Worked	HWK																		
	Shift Differential	SD2																		
	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