

**UCLA DEPARTMENT OF PHYSICS and ASTRONOMY
Biweekly Time Sheet**

NAME _____ PAY PERIOD _____
(Last Name, First Name)

PAY TITLE _____ EMPLOYEE ID# _____

hours not submitted by the due date will be processed with the next biweekly payroll

| ACCOUNT/FUND INFORMATION | |
|---|------------------|
| <p>A</p> <p>B</p> <p>C</p> | |
| <u>VACATION</u> | |
| PREV. BAL. | _____ |
| TAKEN | _____ |
| EARNED* | _____ |
| CURRENT BAL. | _____ |
| <u>SICK LEAVE</u> | |
| PREV. BAL. | _____ |
| TAKEN | _____ |
| EARNED* | _____ |
| CURRENT BAL. | _____ |
| <u>COMP TIME</u> | |
| PREV. BAL. | _____ |
| TAKEN | _____ |
| CTA@1.0 | _____ @1.5 _____ |
| CURRENT BAL. | _____ |
| <p align="center">*Hours earned this month may not be taken until next month.</p> | |

| DAY | DATE | A | B | C | HOL | VAC | SL | OTHER |
|--|------|---|---|---|-----|-----|----|-------|
| SUN | | | | | | | | |
| MON | | | | | | | | |
| TUE | | | | | | | | |
| WED | | | | | | | | |
| THU | | | | | | | | |
| FRI | | | | | | | | |
| SAT | | | | | | | | |
| SUN | | | | | | | | |
| MON | | | | | | | | |
| TUE | | | | | | | | |
| WED | | | | | | | | |
| THU | | | | | | | | |
| FRI | | | | | | | | |
| SAT | | | | | | | | |
| SUB TOT | | | | | | | | |
| TOTAL NUMBER OF HOURS FOR PAY PERIOD | | | | | | | | |
| CODE FOR "OTHER" CTA=Comp Time Earned/CTO=Comp Time Taken JD=Jury Duty/BD=Blood Donation | | | | | | | | |

I certify the hours reported above are correct:

Employee Signature Date

Supervisor Approval Date

rg____
js____