

# UCLA Physics & Astronomy Department Timesheet

**Non-exempt Employee**

Name: \_\_\_\_\_

Email: \_\_\_\_\_

UCLA ID: \_\_\_\_\_

Title Code: \_\_\_\_\_

Month/Yr:  
(Max Hrs)

**Account/Fund No. (%)**

- 1. \_\_\_\_\_ ( %)
- 2. \_\_\_\_\_ ( %)
- 3. \_\_\_\_\_ ( %)
- 4. \_\_\_\_\_ ( %)
- 5. \_\_\_\_\_ ( %)

**Recharge - Account/Fund No. (%)**

- 1. \_\_\_\_\_ ( %)
- 2. \_\_\_\_\_ ( %)
- 3. \_\_\_\_\_ ( %)
- 4. \_\_\_\_\_ ( %)
- 5. \_\_\_\_\_ ( %)

\_\_\_\_\_  
Employee Date

\_\_\_\_\_  
Supervisor Date

**Leave/Accrual Codes Legend**

REG: Regular                      VAC: Vacation  
 HOL: Holiday                      SKL: Sick Leave  
 CTA: Comp Time Accrued      BD: Blood Donation  
 CTO: Comp Time Off              JD: Jury Duty  
 LWOP: Leave without Pay      FUT: Furlough Taken

Date	REG	Other	
		Code	Hours
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			
19			
20			
21			
22			
23			
24			
25			
26			
27			
28			
29			
30			
31			
Total			

Office Use Only:	Roster	EDLR
VAC	_____	_____
SKL	_____	_____
BD	_____	_____
CT	_____	_____
LWOP	_____	_____
FUT	_____	_____

\_\_\_\_\_  
AUDIT  
\_\_\_\_\_  
LA