

AUGSBURG UNIVERSITY

Employee/Student Worker BIWEEKLY TIMESHEET

This form can be scanned/mailed to payroll@augsborg.edu

| |
|----------------------------|
| Name |
| Employee/Student ID Number |
| Department* |

| |
|-----------------------|
| Pay Period Start Date |
| |
| Pay Period End Date |

*One Timesheet per department

| Week 1 | | | Regular Hours | | Absences | |
|----------------|----|-----|---------------|--------|----------|---------|
| Month/ Date | IN | OUT | Hours | Prev + | Hours | Absence |
| | | | Worked | Daily | Absent | Code |
| Sunday | | | | | | |
| Monday | | | | | | |
| Tuesday | | | | | | |
| Wednesday | | | | | | |
| Thursday | | | | | | |
| Friday | | | | | | |
| Saturday | | | | | | |
| Week 1 Totals | | | | | | |

| Week 2 | | | Regular Hours | | Absences | |
|----------------|----|-----|---------------|--------|----------|---------|
| Month/ Date | IN | OUT | Hours | Prev + | Hours | Absence |
| | | | Worked | Daily | Absent | Code |
| Sunday | | | | | | |
| Monday | | | | | | |
| Tuesday | | | | | | |
| Wednesday | | | | | | |
| Thursday | | | | | | |
| Friday | | | | | | |
| Saturday | | | | | | |
| Week 2 Totals | | | | | | |

| OVERTIME AUTHORIZATION | | | | Supervisor: | |
|---|------|--------|-------|-----------------------|--------------|
| * All overtime requires Supervisor Approval * | | | | Complete this section | |
| Date | Time | Reason | # Of | Emergency | Supervisor's |
| | | | Hours | Overtime? | Approval |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| Total Overtime Hours | | | | | |

| Supervisor: Complete this section | |
|-----------------------------------|--|
| SUMMARY OF HOURS | |
| Regular Hours | |
| Overtime Hours | |
| Emergency Overtime | |
| Holiday Hours Worked | |
| Vacation Hours | |
| Sick Hours | |
| Floating Holiday | |
| Personal Time | |
| Holiday | |
| Funeral, WC, Jury Duty | |
| GRAND TOTAL HOURS | |

| | |
|----------------------|------|
| Employee's Signature | Date |
|----------------------|------|

| | |
|------------------------|------|
| Supervisor's Signature | Date |
|------------------------|------|