

Comments

The University of North Carolina at Greensboro
Payroll/Human Resources System
Monthly Time & Leave Record

SPA Subject to Overtime Calendar Periods
<http://web.uncg.edu/hrs/dates/spamonth/>

EMPLOYEE NAME	I.D. Number	LOCATION	PAY PERIOD	
			Begin	
			End	

Work Week 1						
No. of Hours Worked				No. Coded	Hours	CD
Day	Date	Reg	Shift			
Sun						
Mon						
Tue						
Wed						
Thu						
Fri						
Sat						
Total						

Work Week 2						
No. of Hours Worked				No. Coded	Hours	CD
Day	Date	Reg	Shift			
Sun						
Mon						
Tue						
Wed						
Thu						
Fri						
Sat						
Total						

Work Week 3						
No. of Hours Worked				No. Coded	Hours	CD
Day	Date	Reg	Shift			
Sun						
Mon						
Tue						
Wed						
Thu						
Fri						
Sat						
Total						

Earn Cd	Description	CD	Hours
170	Vac Leave Pay	V	
180	Sick Leave Pay	S	
165	Military Leave	M	
195	Bonus Leave	BL	
199	Comm Inv Lv	CI	
090	Overtime 1.5		
095	Overtime 1.0		
030	Shift Pay 10%		
034	Shift Pay 15%		
042	Shift Pay 25%		
080	Holiday Premium Pay		
087	On-Call		

Work Week 4						
No. of Hours Worked				No. Coded	Hours	CD
Day	Date	Reg	Shift			
Sun						
Mon						
Tue						
Wed						
Thu						
Fri						
Sat						
Total						

Work Week 5						
No. of Hours Worked				No. Coded	Hours	CD
Day	Date	Reg	Shift			
Sun						
Mon						
Tue						
Wed						
Thu						
Fri						
Sat						
Total						

FOR DEPARTMENT USE			
Holiday H	.	Comp Lv C	.
		Civil Lv L	.
I certify that the above information is correct to the best of my knowledge.			
_____ Employee Signature		_____ Date	
I have reviewed and certify that the above information is correct to the best of my knowledge.			
_____ Department Head/Supervisor Signature		_____ Date	