ElapsedTimesheet

The purpose of this form is to report time to the Time and Laborteam that is past themanager § accessor changes. Managers can enterme for the current pay period and one pay period backens that are received within themanager § access time frame will be returned. Emails will not be accepted in lieu of this form. However, the formmay be emailed. This form department f

processing.

This form should NOT be used for reporting time for punchtime reporters and will not be processed. Rease use the UNCH TIMESHEET

This form is not for reporting absences Absences will not be processed from this form.

EmployeName:		Employee ID #:	
Timesheet Record #:	Campus	: PayPeriod End Date:	
Reporting Time for	or SUB Pay Needs the Con	nbad&	
WeekOne	Date	Time Reporting Ode	Hours
Saturday			
Sunday			
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			
WeekTwo	Date	Time Reporting Ode	Hours
Saturday			
Sunday			
Monday			
Tuesday			
\\\\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \			
Wednesday			
Thursday			
Friday			
Employee Name:		Manager Name:	
Employee Sigature:		Manager Signature:	
Date:		Date:	
HR Name:		HR Sigature:	
Internal	Received Date:	Processed Date:	