

FROSTBURG STATE UNIVERSITY

NON-EXEMPT CONTINGENT EMPLOYEE TIMESHEET (HOURLY)

PAY PERIOD ENDING DATE _____

EMPLOYEE NAME (LAST, FIRST) _____

EMPL ID _____

DEPARTMENT _____ PS NUMBER _____

CAMPUS PHONE _____

- ▶ Please print clearly & complete in ink.
- ▶ Record time in tenths -- 6 minute segments (see chart).
- ▶ Timesheet must be submitted to the Payroll Office no later than 11:00 a.m. the day following the pay period ending date.
- ▶ Any changes to time logged in/out must be initialed by the employee and supervisor.
- ▶ All information must be completed and the timesheet must be signed by the employee and supervisor.

TENTH HOUR CHART	
MINUTES	HOURS
1 to 6	.1
7 to 12	.2
13 to 18	.3
19 to 24	.4
25 to 30	.5
31 to 36	.6
37 to 42	.7
43 to 48	.8
49 to 54	.9
55 to 60	1 hr

DATE	DAY	IN	OUT	IN	OUT	IN	OUT	TOTAL HOURS	SHIFT DIFF
	WED								
	THURS								
	FRI								
	SAT								
	SUN								
	MON								
	TUES								
TOTAL WEEK #1									

	WED								
	THURS								
	FRI								
	SAT								
	SUN								
	MON								
	TUES								
TOTAL WEEK #2									

EMPLOYEE
SIGNATURE: _____ DATE _____

SUPERVISOR
SIGNATURE: _____ DATE _____

HOURLY RATE \$ _____ X TWO WEEK TOTAL = \$ _____