



Cincinnati Central School  
 2809 Cincinnati Road  
 Cincinnati, N.Y. 13040

## Record of Time Worked-Support Staff

Employee Name: \_\_\_\_\_ Employee Position: \_\_\_\_\_ Employee Number: \_\_\_\_\_

Any time worked over your regularly scheduled hours must have prior approval and be initialed by your supervisor.  
 Report time actually worked, exclude unpaid 30 minute meal period.

| DAY       | DATE  | CAT | TIME IN | LUNCH<br>TIME OUT | LUNCH<br>TIME IN | TIME<br>OUT | CATEGORY             | To be completed<br>by Payroll |
|-----------|-------|-----|---------|-------------------|------------------|-------------|----------------------|-------------------------------|
| Saturday  | _____ | ___ | _____   | _____             | _____            | _____       | V Vacation           | _____                         |
| Sunday    | _____ | ___ | _____   | _____             | _____            | _____       | PI Personal Illness  | _____                         |
| Monday    | _____ | ___ | _____   | _____             | _____            | _____       | PB Personal Business | _____                         |
| Tuesday   | _____ | ___ | _____   | _____             | _____            | _____       | FI Family Illness    | _____                         |
| Wednesday | _____ | ___ | _____   | _____             | _____            | _____       | B Bereavement        | _____                         |
| Thursday  | _____ | ___ | _____   | _____             | _____            | _____       | SB School Business   | _____                         |
| Friday    | _____ | ___ | _____   | _____             | _____            | _____       | C Conference         | _____                         |
|           |       |     |         |                   |                  |             | SL Short Leave       | _____                         |
|           |       |     |         |                   |                  |             | Week Total:          | _____                         |
|           |       |     |         |                   |                  |             |                      |                               |
| Saturday  | _____ | ___ | _____   | _____             | _____            | _____       |                      | _____                         |
| Sunday    | _____ | ___ | _____   | _____             | _____            | _____       |                      | _____                         |
| Monday    | _____ | ___ | _____   | _____             | _____            | _____       |                      | _____                         |
| Tuesday   | _____ | ___ | _____   | _____             | _____            | _____       |                      | _____                         |
| Wednesday | _____ | ___ | _____   | _____             | _____            | _____       |                      | _____                         |
| Thursday  | _____ | ___ | _____   | _____             | _____            | _____       |                      | _____                         |
| Friday    | _____ | ___ | _____   | _____             | _____            | _____       |                      | _____                         |
|           |       |     |         |                   |                  |             | Week Total:          | _____                         |

I declare that the above record of time worked is true, correct, and complete:  
 Employee's Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
 Approved (Supervisor's Signature): \_\_\_\_\_ Approved: \_\_\_\_\_ Not Approved: \_\_\_\_\_ Date: \_\_\_\_\_

|                              |                                    |                            |
|------------------------------|------------------------------------|----------------------------|
| Pay Date: _____              | <b>PAYROLL DEPARTMENT USE ONLY</b> | Date: _____                |
| Account Code: _____          |                                    |                            |
| Straight Time (hours): _____ | x Hourly Rate: _____               | = Straight Time Pay: _____ |
| Overtime Hours: _____        | x Hourly Rate: _____               | = Overtime Pay: _____      |
| <b>Total Hours:</b> _____    | <b>= Total Pay: \$</b> _____       | Completed by: _____        |