

## Northern Oklahoma College Employee Time Sheet

Name \_\_\_\_\_ Position \_\_\_\_\_  
 Month \_\_\_\_\_ Year \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

Hours

	Date	1 <sup>st</sup> WK	DATE	2 <sup>nd</sup> WK	DATE	3 <sup>rd</sup> WK	DATE	4 <sup>th</sup> WK	DATE	5 <sup>th</sup> WK
SAT										
SUN										
MON										
TUE										
WED										
THUR										
FRI										
<b>TOTAL</b>										

TOTAL HOURS WORKED \_\_\_\_\_  
 COMP. HOURS EARNED - \_\_\_\_\_  
 COMP. HOURS USED + \_\_\_\_\_  
 PERSONAL HOURS TAKEN + \_\_\_\_\_  
 SICK HOURS TAKEN + \_\_\_\_\_

COMPENSATORY TIME – Must be approved in advance.

PERSONAL LEAVE- 16 hours per year for any reason.  
 SICK LEAVE- Earn 10 hours per month worked. Max = 360 hours. (Your immediate family only; spouse & children.)

BEREAVEMENT HOURS + \_\_\_\_\_

BEREAVEMENT LEAVE- May be requested for the President based on NOC's Leave Policy.

VACATION HOURS TAKEN + \_\_\_\_\_

VACATION- Based on accrual according to NOC's Leave Policy.

HOLIDAY HOURS + \_\_\_\_\_

HOLIDAYS- As determined by President &/or Board of Regents.

**TOTAL** = \_\_\_\_\_

**NOTE:** TOTAL should always = 160 or 200 hours.

HOURS	COMP.	PERSONAL	SICK	VACATION
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BEGINNING HOURS	_____	_____	_____
HOURS TAKEN -	_____	_____	_____
HOURS EARNED +	_____	_____	_____
ENDING HOURS	_____	_____	_____

Verified as accurate to the best of our knowledge:

\_\_\_\_\_  
SIGNATURE OF EMPLOYEE

\_\_\_\_\_  
SIGNATURE OF SUPERVISOR

**COMP. TIME: (check one)** \_\_\_\_\_ APPROVED

\_\_\_\_\_ NOT APPROVED

\_\_\_\_\_  
DIRECTOR ( if applicable)

\_\_\_\_\_  
VICE- PRESIDENT

\_\_\_\_\_  
PRESIDENT