

State University of New York at Purchase College
 Hourly Classified Time and Accrual Record
 HOURLY RATE \$ _____

LAST NAME ↑ FIRST NAME ↑
 SS# (last 4 digits only) LINE# DEPT. NAME

Eligible Veteran Eligible Former Reservist
 Effective Date of Military Leave: FROM ____/____/____

PRINT HERE

____/____/____
 Date of Continuous State Service

____/____/____
 Last Day Of Pay Period Ending

Normal Work Week (check one) Extra Payment Night Shift Differential 6pm - 6am
 37.50 Hours 40 Hours Other Hours Worked Full Time Nights Part Time Nights

ANNIVERSARY ↑

PAY PERIOD ↑

DATES			TIME IN / TIME OUT				PRESENT			CHARGABLE ABSENCES										BILLABLE			
DAY	MONTH	DATE	IN	OUT	IN	OUT	IN	OUT	REG	OVT	M / V	SHIFT	VAC	SICK	PERS	HOL	COMP	LWOP	LWHP	LWFP	MIL LV	OT ACCOUNT	
WED																							
THUR																							
FRI																							
SAT																							
SUN																							
MON																							
TUE																							
			TOTAL HRS WEEK 1 →																				
WED																							
THUR																							
FRI																							
SAT																							
SUN																							
MON																							
TUE																							
			TOTAL HRS WEEK 2 →																				
			GRAND TOTAL HRS WEEK 1 AND 2 →																				

ACCRUAL SUMMARY	VACATION	SICK	PERSONAL	HOLIDAY	COMP	REMARKS	OVERTIME HOURS →		
BEGINNING BALANCE (from previous pay period)							STANDBY HOURS →		
EARNED this Pay Period							Payroll Use Only		
BONUS Vacation							OT	Meals	Standby
SUB-TOTAL									
USED this Pay period							Holiday		Night Shift Diff
ENDING BALANCE OF THIS Pay Period									

Employee Signature _____ Date _____

Supervisor Signature _____ Date _____

M=MANDATORY OT / V=VOLUNTARY OT (supervisors check one) / LWOP=Leave without pay / LWHP=Leave with half pay / LWFP=Leave with full pay / MIL LV=Military Leave

I certify that this is a true and correct attendance and absence records. All leaves taken have been in accordance with the NY State Rule of Attendance.