

**THE UNIVERSITY OF TEXAS AT SAN ANTONIO**  
**Hourly Employee Time Record**

**Please Print**

Name of Student \_\_\_\_\_ EID No. \_\_\_\_\_

Job Title \_\_\_\_\_ Payroll Period: From: \_\_\_\_\_ To: \_\_\_\_\_

Department \_\_\_\_\_ Account No. \_\_\_\_\_

The Hourly Employee Time Record must be completed by all employees appointed on an hourly paid basis. It is the responsibility of the supervisor to certify the accuracy of this record. Hourly employees are paid on the 5<sup>th</sup> working day following the 15<sup>th</sup> of the month and following the last day of the month. The Original Departmental Payroll Voucher and Original Hourly Employee Record must be submitted to the Payroll Office no later than the first work day following the 15<sup>th</sup> and last work day of each month.

	FIRST WEEK			SECOND WEEK			THIRD WEEK		
	DATE	HOURS WORKED	HOURS ABSENT*	DATE	HOURS WORKED	HOURS ABSENT*	DATE	HOURS WORKED	HOURS ABSENT*
SUN									
MON									
TUE									
WED									
THUR									
FRI									
SAT									
	WEEKLY TOTALS			WEEKLY TOTALS			WEEKLY TOTALS		
	TOTAL WEEKLY HOURS TO BE PAID			TOTAL WEEKLY HOURS TO BE PAID			TOTAL WEEKLY HOURS TO BE PAID		

\*Use proper code in upper portion of Hours Absent Box as follows: (V) - Vacation leave; (S) - Sick leave; (C) - Compensatory leave; (J) - Jury leave; (M) - Military Training; (A) - Administrative leave; (H) - Holiday

I hereby certify that the time reported is exact and that the work was performed by the employee so named.

\_\_\_\_\_  
Employee's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Supervisor's Signature

\_\_\_\_\_  
Date