

THE UNIVERSITY OF MEMPHIS

NON-EXEMPT PAID SALARY FOR FLUCTUATING HOURS

GRADUATE ASSISTANTS & SOME PART-TIME EMPLOYEES

NAME: _____ BANNER ID: _____
 THE DATE PERIOD BEGINNING: _____ AND ENDING: _____

FIRST WEEK:

SECOND WEEK:

<p>SATURDAY TOTAL HOURS PRESENT: _____</p> <p>SUNDAY TOTAL HOURS PRESENT: _____</p> <p>MONDAY</p> <p>IN: _____ OUT: _____ NO. OF HOURS: _____</p> <p>IN: _____ OUT: _____ NO. OF HOURS: _____</p> <p>TOTAL HOURS PRESENT: _____</p> <p>STRAIGHT OVERTIME: _____</p> <p>PREMIUM OVERTIME: _____</p> <p>TOTAL HOURS: _____</p> <p>TUESDAY</p> <p>IN: _____ OUT: _____ NO. OF HOURS: _____</p> <p>IN: _____ OUT: _____ NO. OF HOURS: _____</p> <p>TOTAL HOURS PRESENT: _____</p> <p>STRAIGHT OVERTIME: _____</p> <p>PREMIUM OVERTIME: _____</p> <p>TOTAL HOURS: _____</p> <p>WEDNESDAY</p> <p>IN: _____ OUT: _____ NO. OF HOURS: _____</p> <p>IN: _____ OUT: _____ NO. OF HOURS: _____</p> <p>TOTAL HOURS PRESENT: _____</p> <p>STRAIGHT OVERTIME: _____</p> <p>PREMIUM OVERTIME: _____</p> <p>TOTAL HOURS: _____</p> <p>THURSDAY</p> <p>IN: _____ OUT: _____ NO. OF HOURS: _____</p> <p>IN: _____ OUT: _____ NO. OF HOURS: _____</p> <p>TOTAL HOURS PRESENT: _____</p> <p>STRAIGHT OVERTIME: _____</p> <p>PREMIUM OVERTIME: _____</p> <p>TOTAL HOURS: _____</p> <p>FRIDAY</p> <p>IN: _____ OUT: _____ NO. OF HOURS: _____</p> <p>IN: _____ OUT: _____ NO. OF HOURS: _____</p> <p>TOTAL HOURS PRESENT: _____</p> <p>STRAIGHT OVERTIME: _____</p> <p>PREMIUM OVERTIME: _____</p> <p>TOTAL HOURS: _____</p> <p>TOTAL HOURS PRESENT IN WEEK 1: _____</p> <p>STRAIGHT OVERTIME: _____</p> <p>PREMIUM OVERTIME: _____</p> <p>TOTAL HOURS IN WEEK 1: _____</p>	<p>SATURDAY TOTAL HOURS PRESENT: _____</p> <p>SUNDAY TOTAL HOURS PRESENT: _____</p> <p>MONDAY</p> <p>IN: _____ OUT: _____ NO. OF HOURS: _____</p> <p>IN: _____ OUT: _____ NO. OF HOURS: _____</p> <p>TOTAL HOURS PRESENT: _____</p> <p>STRAIGHT OVERTIME: _____</p> <p>PREMIUM OVERTIME: _____</p> <p>TOTAL HOURS: _____</p> <p>TUESDAY</p> <p>IN: _____ OUT: _____ NO. OF HOURS: _____</p> <p>IN: _____ OUT: _____ NO. OF HOURS: _____</p> <p>TOTAL HOURS PRESENT: _____</p> <p>STRAIGHT OVERTIME: _____</p> <p>PREMIUM OVERTIME: _____</p> <p>TOTAL HOURS: _____</p> <p>WEDNESDAY</p> <p>IN: _____ OUT: _____ NO. OF HOURS: _____</p> <p>IN: _____ OUT: _____ NO. OF HOURS: _____</p> <p>TOTAL HOURS PRESENT: _____</p> <p>STRAIGHT OVERTIME: _____</p> <p>PREMIUM OVERTIME: _____</p> <p>TOTAL HOURS: _____</p> <p>THURSDAY</p> <p>IN: _____ OUT: _____ NO. OF HOURS: _____</p> <p>IN: _____ OUT: _____ NO. OF HOURS: _____</p> <p>TOTAL HOURS PRESENT: _____</p> <p>STRAIGHT OVERTIME: _____</p> <p>PREMIUM OVERTIME: _____</p> <p>TOTAL HOURS: _____</p> <p>FRIDAY</p> <p>IN: _____ OUT: _____ NO. OF HOURS: _____</p> <p>IN: _____ OUT: _____ NO. OF HOURS: _____</p> <p>TOTAL HOURS PRESENT: _____</p> <p>STRAIGHT OVERTIME: _____</p> <p>PREMIUM OVERTIME: _____</p> <p>TOTAL HOURS: _____</p> <p>TOTAL HOURS PRESENT IN WEEK 2: _____</p> <p>STRAIGHT OVERTIME: _____</p> <p>PREMIUM OVERTIME: _____</p> <p>TOTAL HOURS IN WEEK 2: _____</p>
<p>TOTAL HOURS FOR THE TWO WEEK PERIOD: _____</p>	

EMPLOYEE'S SIGNATURE: _____ DATE: _____

SUPERVISOR'S SIGNATURE: _____ DATE: _____

Form should be kept in department files for 3 years. DO NOT enter on hourly timesheets.