



HOURLY ATTENDANCE REPORT

Assignment #(can be found on you pay stub)				Del. Drop			Dept.			Pay Period From					To	
Name							Assignment #:									
Day	Sat	Sun	Mon	Tue	Wed	Thu	Fri	Sat	Sun	Mon	Tue	Wed	Thu	Fri		
Date																
In																
Out																
In																
Out																
Overtime																
In																
Out																
Total																
CERTIFICATIONS: Employee: I certify that the above time and attendance information is true and complete to the best of my knowledge. Employee _____ Date _____ Supervisor _____ Date _____ Project Director _____ Date _____											Supervisor/Project Director: I confirm that the employee worked all of the above hours on the account noted. If the employee worked on multiple accounts, the distribution of hours is as noted below.				Summary	
											Regular Hours					
											Overtime Hours					
											Premium Hours					
											Total					
<u>Project</u>			<u>Task</u>			<u>Award</u>			<u>%</u>			<u>Total Hours</u>				

**After 6 consecutive hours you must take a 30 minute break, which should be reflected on your timesheet.