

**STATE UNIVERSITY OF NEW YORK AT NEW PALTZ
RESEARCH FOUNDATION TIME SHEET – NON-PROFESSIONAL EMPLOYEE**

PLEASE PRINT

NAME:			PAY PERIOD		
DEPARTMENT:			FROM _____ TO _____ mm/dd/year mm/dd/year		
AWARD #	PROJECT #	TASK #	% OF TIME:		

DAY	DATE	REGULAR TIME				COMP. TIME/ OVERTIME		TIME EARNED		LEAVE TAKEN			
		IN	Lunch		OUT	IN	OUT	Comp. Time	Over- time	Annual	Sick	Comp. Time	Personal
			OUT	IN									
SAT													
SUN													
MON													
TUES													
WED													
THURS													
FRI													
SAT													
SUN													
MON													
TUES													
WED													
THURS													
FRI													
TOTALS													

ACCRUAL SUMMARY

	ANNUAL LEAVE	SICK LEAVE	COMP.	PERSONAL LEAVE
BALANCE BROUGHT FORWARD				
CHARGES THIS PERIOD				
SUB-TOTAL				
CREDITS EARNED THIS PERIOD				
BALANCE CARRIED FORWARD				

I CERTIFY THAT THIS TIME SHEET IS A TRUE STATEMENT OF HOURS WORKED. THE DISTRIBUTION OF EFFORT IS A REASONABLE ESTIMATE OF WORK PERFORMED ON SPONSORED PROJECTS.

EMPLOYEE

DATE

PROJECT DIRECTOR

DATE

PROJECT DIRECTOR – PRINTED NAME